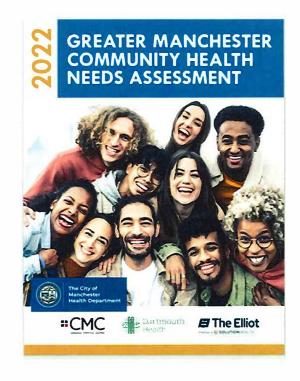
CATHOLIC MEDICAL CENTER

2022 COMMUNITY HEALTH IMPLEMENTATION STRATEGY





Introduction

Catholic Medical Center (CMC) primarily serves patients of the Greater Manchester Health Service Area, but also serves as a statewide resource for New Hampshire's Critical Access Hospitals. In conjunction with the City of Manchester Health Department, Dartmouth Health and Elliot Health Systems, CMC conducted the 2022 Greater Manchester Community Health Needs Assessment (CHNA) of the primary area served by the hospital pursuant to requirements of Section 501(r) of the Internal Revenue Code. This Community Health Implementation Strategy (CHIS), also required by Section 501(r), documents the efforts of CMC in addressing the prioritized community health needs identified in the CHNA. This Community Health Implementation Strategy is a three (3) year plan for community health improvement and should be considered a fluid document that has the ability to be edited based upon the changing needs of the community. The CHNA and CHIP are reviewed and approved by the CMC Board of Trustees and are available on the hospital's website.

The 2022 Greater Manchester Community Health Needs Assessment focuses on six priority areas.

1: Social and Economic Factors

Priority: Improve Education Outcomes

2: Health Behaviors

Priority: Reduce and Prevent Substance Misuse

3: Clinical Care

Priority: Improve Access to Quality Preventative Healthcare

4: Nutrition and Food Security

Priority: Improve Access to Healthy Foods

5: Healthy Homes & Neighborhoods

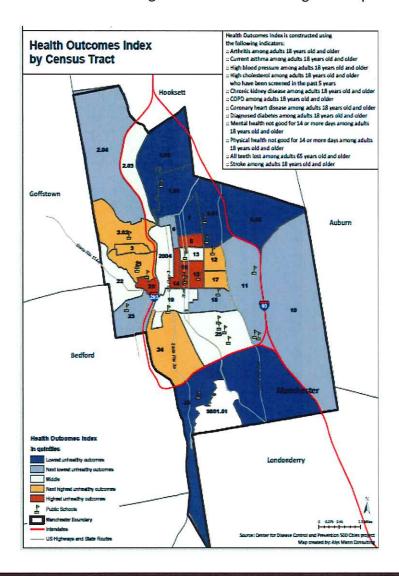
Priority: Improve Access to Healthy, Affordable Housing

6. Trauma and Health Outcomes

Priority: Prevent and Address Trauma

CENSUS TRACTS 20 & 21 - Two Neighborhoods of Opportunity on Manchester's West Side

While the 2022 Community Health Implementation Strategy is designed to improve health of all residents in the Greater Manchester Region, CMC is an a unique position to implement some of the strategies outlined in this document to address the disproportionate health needs of residents in neighborhoods surrounding the hospital campus.



Census Tract 20 encompasses the Piscataquog Neighborhood, home of Granite Square (also known as Little Square or "Squog"). This neighborhood is bordered by Gates and Hector Streets the north, the Merrimack River to the east, Queen City Avenue to the south, and the Piscataquog River to the west. Today, South Main Street, which runs through this neighborhood, is the primary business section of the West Side. In the 1840's, as the mills prospered, the immigrant community grew. The Germans settled in this west side neighborhood of the city, in the south central area around Granite Square, and spread out to what they termed the "Flats" or "Finkenthal" section encompassing Blucher, Whittemore, Cumberland, Thornton and Whipple Streets

Census Tract 21 which encompasses the Notre Dame Neighborhood is located along the Merrimack River on the west side of Manchester. It is bordered by Amory Street to the north, the Merrimack River to the east, Hecker and Gates Streets to the south, and the Piscataquog River to the west. Notre Dame is anchored by Sainte Marie's Parish. Sainte Marie's Parish is a Catholic Church that was founded by French-Canadian immigrants. In 1908, Monsignor Pierre Hevey, Pastor of Sainte Marie's Parish, organized what was soon to be known as the first credit union. The goal was to help the primarily Franco-American mill workers save and borrow money. On November 24, 1908 "La Caisse Populaire, Ste-Marie" (The People's Bank) opened its doors as the first credit union in the nation. Today, the credit union is known as St. Mary's Bank. Monsignor Pierre Hevey, along with the Sisters of Charity of St. Hyacinthe, was also instrumental in the establishment of Notre Dame Hospital in 1894, which is now known as Catholic Medical Center.

1. Social and Economic Factors. Priority: Improve Education Outcomes

Factor	Description	Goal(s)	Strategies / Activities	Community Partnerships
Education 1.1	Educational status is a significant predictor of health outcomes. Better educated individuals live longer and healthier lives than those with less education and their children are more likely to thrive	Improve educational opportunity for Manchester's children & adults Support workforce development	Provide educational opportunities for high school students with a focus on West High School & Holy Family Academy Support Holy Cross Family Learning Center Support "Leader in Me" at Gossler Park Elementary School Support HISET (GED) and ESOL testing Continue to host student nurses & residents	MSD HFA HCFLC MCC St A NHTI UNH MCPHS
Employment 1.2	Stable employment is associated with a healthier life. Unemployment has been linked to unhealthy coping behaviors such as substance use disorders (SUD) and increased levels of anxiety and depression	Support workforce development Provide new employment opportunities at CMC	Host N4H Workforce Development & support activities to provide scholarships, leadership, management and DEI training Increase access to better jobs by expanding LNA, MA and RN program at CMC Host interns, student nurses & residents Increase CMC workforce to meet expansion demand	N4H MCC St A NHTI UNH MCPHS NEC
Income / Poverty 1.3	Income provides economic resources for housing, education, childcare, food and medical care. Ongoing stresses of poverty can lead to cumulative physical and mental health challenges including chronic illnesses	Provide direct and indirect support to assist those in need	Continue to offer robust Charity Care Programs & Community Benefit Continue to offer programs for persons living in poverty such as Healthcare for the Homeless, Wilson Street Integrated Health, Poisson Dental Facility and Pregnancy Care Center Continue to Support Amoskeag Health Continue to offer Patient Assistance Services such as Medication Assistance Program and Breast and Cervical Cancer Screening	MHD FIT / NHNH Amoskeag Health MRTC NH BCCP

2: Health Behaviors. Priority: Reduce and Prevent Substance Misuse

Factor	Description	Goal	Strategies / Activities	Community Partnerships
Alcohol and Drug Use 2.1	The opioid crisis remains at the forefront of public health issues in Manchester. Excessive alcohol consumption remains the third leading cause of death in the US. In addition to their obvious health impacts such as increases the risks for high blood pressure, heart disease, liver disease and cancer, alcohol and drug misuse have significant economic costs from lost productivity, increased health care expenditures and criminal justice expenses.	Reduce risky and unhealthy alcohol and drug use Decrease opioid overdoses and deaths as well as rates of unintentional injuries linked to SUD	Continue to operate and expand services at the Doorway for the purpose of linking SUD patients to resources in the community Continue Narcan distribution program Continue participate in the Manchester SUD Collaborative and Manchester Emergency Operation Center's work groups Expand CMC addiction services both inpatient and outpatient Expand MAT Services in Primary Care Assure screening for SUD in all Primary Care Continue community education on the risks of adolescent drug misuse and binge drinking	NH DHHS MFD MPD AMR FIT Farnum City of Manchester EHS HCDOC MIH MSD MHCGM
Diet & Exercise 2.2	Physical activity and a balanced, nutritious diet are essential for good health. Physical activity also promotes better emotional health and reduces the risks of many chronic diseases.	Reduce BMI Decrease diabetes and pre-diabetes Reduce BMI	Participate in City of Manchester's Neighborhood Health Improvement Strategy Provide PPA patients with available wellness programs Continue to offer community education/wellness programs and exercise classes Explore adding a west side farmer's market Continue CMC Preventative Food Pantry Promote New England Weight Management Institute – an accredited center for caring for overweight/obese populations via lifestyle	MHD ORIS PTFP
		Decrease diabetes and pre-diabetes	moderation, supplemental dietary support and surgical interventions	

			Continue to offer Pre-Diabetes Self-Management class: a yearlong series of classes and support aimed at identifying and addressing behaviors that increase one's risk of developing diabetes Continue to offer the Diabetes Resource Institute out of CMC to care for, educate and support patients with DM and pre-Diabetes Provide Nurse Care Coordinators in each of the primary care practices provide resources and individualized care to high risk/ill patients to improve health outcomes	
Tobacco Use 2.3	Tobacco use continues to be the leading cause of preventable death in the United States and is continually linked to adverse health outcomes.	Reduce smoking and vaping rates in the community	Continue community education on the risks of teen vaping & smoking risks	MIH MHD MSD

3: Clinical Care. Priority: Improve Access to Quality Preventative Healthcare

Factor	Description	Goal	Strategies / Activities	Community Partnerships
Access to Care 3.1	Access to care is dependent on an individual's ability to obtain the right care, at the right time, in the right setting. Having a primary care provider, adequate health insurance and fewer barriers all improve access to care. Access to care includes preventative health care, care for ambulatory care sensitive conditions, acute care, dental care and pre-natal care.	Improve access to primary care and oral health care Reduce emergency rooms visits for acute and chronic ambulatory care sensitive conditions	Streamline procedure to increase capacity at Primary Care Offices through Access Line Provide transportation to PCP appointments Increase access for low income / homeless at HCH and Wilson Street Integrated Health, Pregnancy Care Center, Amoskeag Health Investigate high utilizers of emergency room and link back to primary care with a safety plan Expand hours of Poisson Dental Facility and expand treatment to adults with Medicaid Continue supporting school based oral health program Expand HCH Street Medicine Program	Amoskeag Health EHS MSD MHD DH HCH
Quality of Care 3.2	Healthcare services that are timely, evidence based and patient centered result in the best overall health care outcomes.	Improve screening rates for breast cancer, colon cancer and cholesterol screening	Provide timely, recommended screenings to all patients in the PPA. Utilize Community Health Worker in identifying patients in need of screening Offer community based cancer screening programs, cholesterol testing programs, blood pressure clinics	AHA ACS NH DHHS HCH
Mental Health Care 3.3	Individuals who report frequent poor physical and mental health tend to utilize the health care system more frequently and have a higher rate of mortality	Improve access to mental health services	Integrate behavioral health into all primary care offices Screen all primary care patients - SBIRT Offer mental health first aid trainings Work towards zero suicide Continue to support Veterans Care Coordinator Explore additional in-patient supports	MHCGM ESMVS

4: Nutrition and Food Security. Priority: Improve Access to Healthy Foods

5: Healthy Homes & Neighborhoods. Priority: Improve Access to Healthy, Affordable Housing

Factor	Description	Goal	Strategies / Activities	Community Partnerships
Improve Access to Health Foods 4.1	Health promoting assets such as access to health foods and proximity to parks or green space are linked to reduced risks of obesity, diabetes, cancer and heart disease.	Provide new health promoting opportunities on the west side	Explore the re-establishment of a Farmers Market on the west side with expanded SNAP Explore utilizing opportunities at Lafayette Park as part of CMC's campus expansion Continue Preventative Food Pantry Participate in the Manchester Food Collaborative	ORIS City of Manchester St Mary's Bank Ste. Marie Parish ACUM PTFP MFC
Housing 5.1	Safe, affordable and stable housing is important to overall well-being. Lead, indoor allergens such as mold and dust, overcrowding and excessive housing costs are all factors that contribute to negative health outcomes.	childhood lead poisoning Reduce ED	Universally- screen all 1 and 2-year-old children at primary care locations Expand HCH and Street Medicine home visiting models to link homeless patients with housing services Work with children in community settings such as the YMCA on identifying triggers, self-care and reducing the risks of asthma	MHD EHS
Transportation 5.2	A robust transportation system (i.e. public transportation, cars, bikes sidewalks, streets) connects people to each other, work, home, healthcare and other services and can be a positive force in improving health outcomes.	Support a robust transportation system	Expand the CMC shuttle service to assist in medical visits, grocery store visits and socialization activities Assist patients with utilizing Manchester Transportation Authority	MTA

6. Trauma and Health Outcomes. Priority: Prevent and Address Trauma

Factor	Description	Goal	Strategies / Activities	Community Partnerships
Prevent and Address Trauma 6.1	"resulting from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual wellbeing."	Understand the causes of trauma such as adverse childhood experiences and the role of trauma in the healthcare setting	Provide trauma informed care trainings to front line staff Incorporate adverse childhood experience examples into Resiliency Rounds Expand Behavioral Health Services Expand Roots for Recovery Program Support Veteran's Care Coordinator Support Manchester's Adverse Childhood Experiences Response Team and Public Health and Safety Team	ESMVP MHCGM MPD YWCA Amoskeag Health MHD
Family & Social Support 6.2	Individuals with strong social supports live longer and healthier lives than those that are socially isolated. Socially isolated individuals are at increased risk of poor health outcomes due to SUD, smoking and overeating	Connect community residents and patients with resources	Continue to offer Parish Nurse Program Continue Offering Health and Wellness classes Support Granite Unite Way Annual Campaign Support Community Health Worker for MSD Expand Behavioral Health Services Expand Roots for Recovery Program Support Veteran's Care Coordinator	MSD GUW Amoskeag Health MSD N4H ESMVP
Community Safety 6.3	Feeling safe in your community is associated with positive health outcomes. An individual's sense of safety is affected by both intentional and unintentional injuries such as violent crime, domestic violence and drug overdoses.	Recognize and reduce crime in the Community Provide residents options for safe drug and needle disposal	Train staff in signs of human trafficking and domestic violence Support MPD Substation at CMC Continue to participate in City-wide workgroups to address substance use disorder, homelessness and community safety Support annual drug take back days Offer safety training through HCSO and Parish Nurse Program	MPD DHS City of Manchester DEA HCSO

Persistent Poverty and Limited Opportunity 6.4	Persistent intergenerational poverty is a complex problem. When compounded by conditions in high poverty urban neighborhoods, a child's long-term opportunities for success and good health are greatly undermined.	Provide opportunities to break generational poverty	Position CMC to be an anchor Institution for the West Side Support initiatives as outlined in Section 1-5 above	Ste. Marie Parish St. Mary's Bank ACUM
Aging Population 6.5	The aging of the population will fuel higher demand for health care services for chronic diseases, as well as for nursing home care.	Prepare for the needs of an aging population	Continue to offer/consider expanding the Parish Nurse Program; home care; community and wellness clinics/exercise classes; mental health case management and falls prevention	MHD

* Key Abbreviations

MSD - Manchester School District

HFA - Holy Family Academy

MCC - Manchester Community College

HCFLC - Holy Cross Family Learning Center

N4H - Network 4 Health; Manchester Region's Integrated Delivery Network (IDN)

St A – Saint Anselm's College

NHTI - New Hampshire technical Institute

UNH - University of New Hampshire

MCPHS - Mass College of Pharmacy and Health Services

NEC- New England College

MHD - Manchester Health Department

FIT / NHNH - Families in Transition- New Horizons

MRTC - Manchester Recovery and Treatment Center

GUW - Granite United Way

ESMVP - Easter Seals Military and Veterans Program

MPD- Manchester Police Department

DHS- Department of Homeland Security

DEA - Drug Enforcement Agency

AMR- American Medical Response

EHS - Elliot Health Systems

NH DHHS & NH BCCP - New Hampshire Department of Health & Human Services & New Hampshire Breast and Cervical Cancer Program

HCDOC & HCSO - Hillsborough County Department of Corrections & Hillsborough County Sheriff's Office

MIH - Makin' It Happen

DH- Dartmouth Hitchcock

HCH -Health Care for the Homeless

AHA - American Heart Association

ACS - American Cancer Association

MHCGM - Mental Health Center of Greater Manchester

MTA - Manchester transit Authority

ORIS - Organization for Refugee and Immigrant Success

PTFP - Parish of the Transfiguration Food Pantry

MFC - Manchester Food Collaborative

ACUM - America's Credit Union Museum