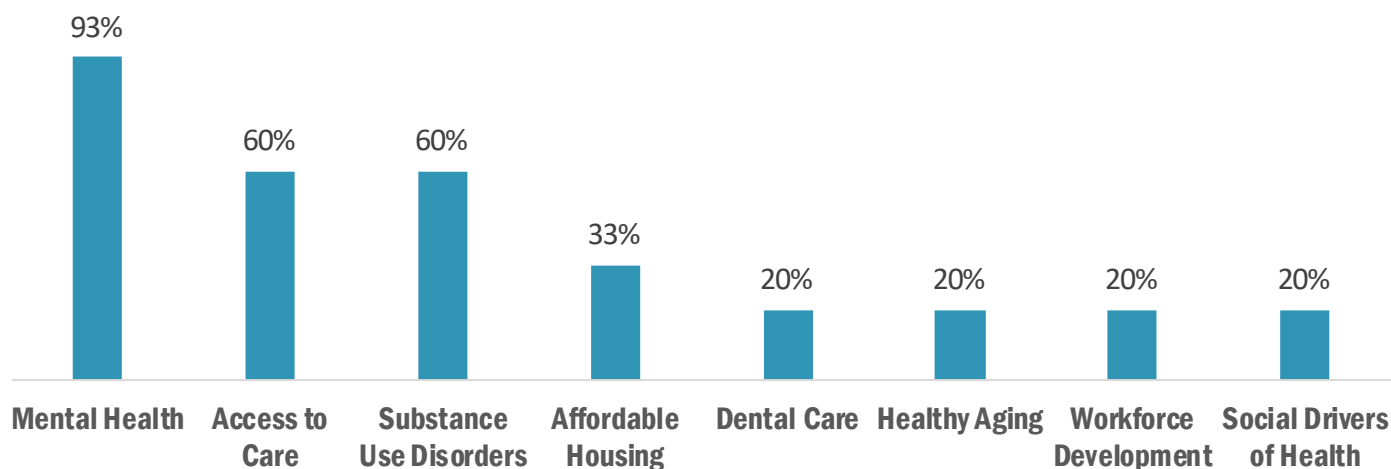


## Vermont's Community Health Needs Assessment

Under the Patient Protection and Affordable Care Act (ACA) in accordance with IRS requirements for not-for-profit hospitals, each Vermont hospital is responsible for completing a Community Health Needs Assessment (CHNA) every three years. A CHNA must solicit and consider input from persons representative of the broad interests of the community being served by the hospital facility and be available to the public. Each hospital also must adopt an implementation strategy that meets the needs identified in the CHNA. Some of the identified priority areas share a focus but are worded differently in individual hospital CHNAs.

### Top Community Health Priorities of Vermont Hospitals

93% of Vermont hospitals identified mental health as a priority.



### Key Points

- **Hospitals may have similar priorities worded differently.**
- **Mental health was identified as a need in 93% of Vermont hospital CHNAs.**
- **Access to care and substance use disorders were identified as needs in 60% of Vermont hospital CHNAs.**
- **Affordable and safe housing was identified as a need in 33% of Vermont hospital CHNAs.**

# Overview of Vermont Hospitals' Priority Health Needs

## Health Needs Identified by Vermont Hospitals'

	Brattleboro Memorial Hospital	Brattleboro Retreat	Central Vermont Medical Center	Copley Hospital	Gifford Health Care	Grace Cottage	Mt Ascutney	North Country	Northeastern Vermont Regional Hospital	Northwestern Medical Center	Porter	Rutland Regional Medical Center	Southwestern Vermont Medical Center	Springfield	UVMHC
Mental Health	x	x	x	x	x	x	x	x	x		x	x	x	x	x
Chronic Conditions	x		x												
Healthy Aging	x					x						x			
Health Equity	x														
Cancer Treatment and Prevention	x					x									
Access to Care		x		x	x			x		x	x		x	x	x
Substance Use Disorders		x	x	x		x	x	x					x	x	
Social Drivers of Health			x				x							x	
Overweight / Obesity Issues				x											
Poor Eating Habits				x											
Lifestyle Disease Prevention					x								x		
Dental Care					x		x							x	
Nutritional Fitness / Diabetes						x									
High Blood Pressure						x									
Cost of Healthcare Service and Health Insurance							x							x	
Strengthening Families							x								
Affordable Housing								x	x		x	x			x
Employment / Workforce Development								x						x	x
Financial Security									x						
Physically Healthy									x						
Well Nourished									x						x
Affordability (overall)										x					
Community Gathering & Connectedness										x					
Safety & Belonging										x					
Childcare / Parenting												x			
Cultural Humility & Inclusive Health Care															x

# Overview of Vermont Hospitals' Priority Health Needs

## Mental Health

Mental health was the most frequently identified priority health need, appearing in 93% of hospital CHNAs. Concerns include access and availability of services and support, emergency mental health services, and support for stress, anxiety, depression, and social isolation. Interventions include increased screening and embedding mental health professionals across settings, expansion of treatment offerings, working with community partners to support education and wellness programs, outreach to populations with barriers to care or services, and telehealth partnerships.

## Access to Care

Access to care was identified as a priority health need in 60% of hospital CHNAs. Concerns include lack of access to care across the spectrum from regular primary care to specialized care. Interventions include emergency department screening for primary care and utilization of embedded social workers to facilitate connection with programs or providers, identifying barriers and gaps to getting care and partnering with community partners for outreach, expansion of hours to include evening and/or weekend appointments, utilization of telemedicine, and ongoing efforts towards recruiting and retaining care providers.

## Substance Use Disorders

Substance use disorders were identified as a priority health need in 60% of hospital CHNAs. Concerns include increase in deaths involving heroin and synthetic opioids other than methadone, increase in marijuana use among youth and adults, high rates of alcohol use and gaps in services for detox and recovery housing. Interventions include increased screening and provision of appropriate referrals across settings, utilization of a community wide framework with partners to develop best practices, prevention programming, decrease gaps in services and barriers to care, access to Medication Assisted Treatment in the Emergency Department and other settings, and expansion of harm reduction activities and communication.

## Affordable Housing

Affordable housing was identified as a priority health need in 33% of hospital CHNAs. Concerns identified include lack of safe affordable housing for renters and buyers, sober housing, housing for elders, temporary and permanent housing for people experiencing homelessness, and the need for a common application process across agencies to streamline support and decrease barriers to access. Interventions include development of additional shelter space for families, bridge housing that includes wrap around services, increasing permanent housing for those that are chronically homeless, and creation of a common application process.

## Dental Care

Dental care was identified as a priority health need in 20% of hospital CHNAs. Concerns identified include lack of access, cost, insurance, long wait times, and providers not accepting new patients. Interventions include working with community partners and local providers to increase awareness for assistance available in accessing dental services, offering mobile services in a variety of locations, and providing referrals for Emergency Department patients for preventative services.

## Healthy Aging

Healthy aging was identified as a priority health need in 20% of hospital CHNAs. Concerns identified include high median age of residents, Vermont is 3<sup>rd</sup>, and the anticipated increased demand on health care systems as the population continues to age. Interventions include creation of easily accessible rehab space, prevention programs, community wellness programs, utilization of evidence-based practices to deliver high quality care as well as working with community partners to provide education and management for those with chronic conditions.

## Employment & Workforce Development

Employment and workforce development were identified as priority health needs in 20% of hospital CHNAs. Concerns identified include limited employment opportunities, lack of affordable childcare, available employment not paying a livable wage, an unstable workforce, particularly in healthcare. Interventions include improved access to affordable childcare, creative employment offerings including bonuses or flexible scheduling, and increased educational training opportunities including collaborating with community partners, telehealth or distance learning, and scholarship programs.

## Social Drivers of Health & Socio-economic Conditions Affecting Health and Well-being

Social drivers of health and the socio-economic conditions that affect health and well-being were identified as priority health needs in 20% of hospital CHNAs. Concerns identified include poverty and those with income above the federal poverty level but below the threshold necessary to meet all basic needs, affordable housing, affordable childcare, livable wages, ability to buy and eat healthy food, Interventions include expanding patient screening processes to include additional factors that impact health outcomes in order to align referrals and community resources, healthy food assistance including deliveries, and supporting local housing and child care initiatives.

### **Cost of Healthcare Services & Affordability of Health Insurance**

The cost of healthcare services and affordability of health insurance were identified as priority health needs in 13% of hospital CHNAs. Concerns identified include cost of prescription drugs, challenges accessing one or more type of health or human service, and delaying or avoiding health care due to cost. Interventions include evaluating, updating, and promoting hospital Financial Assistance Policies, and community support services to help alleviate financial burden.

### **Lifestyle Disease Prevention & Promotion of Healthy Behaviors & Primary Prevention Activities**

Lifestyle disease prevention and promotion of healthy behaviors and primary prevention activities were identified as priority health needs in 13% of hospital CHNAs. Concerns include diabetes prevention and management, smoking, high blood pressure and food insecurity. Interventions include working with community partners and schools to provide lifestyle disease prevention and management workshops, working with community partners to provide access to food through several different models and programs, providing screening opportunities for early detection of cancer and chronic conditions, and providing and maintaining trails and other areas of the built environment that support healthy decisions.

### **Cancer Treatment and Prevention**

Cancer treatment and prevention were identified as priority health needs in 13% of hospital CHNAs. Concerns include greater incidence of cancers of the breast, lungs/bronchus, uterus, bladder, and skin for females in Vermont than the U.S. average and cancers of the skin, bladder, esophagus, and non-Hodkin's lymphoma for males in Vermont than the U.S. average. Interventions include utilization of grants to increase screening opportunities and rates and collaboration with an out of state medical center's cancer program, and targeted outreach to at risk age groups.

### Chronic Conditions

Chronic conditions were identified as priority health needs in 13% of hospital CHNAs. Concerns include preventable chronic conditions being responsible for 7 in 10 deaths each year, as well as being the leading cause of death and disability in the U.S. Cancer, diabetes, heart disease, high blood pressure, high cholesterol, lung disease, mental illness, obesity, lack of physical activity, stress, and substance abuse have the greatest impact on the health of Vermonter's. Interventions include collaboration with community partners to improve provider cultural competency and assess patient educational materials for language availability and literacy levels, improving the delivery of primary care to have a larger impact on chronic conditions, collaboration with community partners to support educational and management programs for specific chronic conditions including diabetes, substance use disorder, hypertension, congestive heart failure, and chronic obstructive pulmonary disease.

### Well Nourished

Well Nourished was identified as a priority health need in 13% of hospital CHNAs. Concerns include an increase in food insecurity and decrease in consumption of fruits and vegetables. Interventions include collaboration with multiple community partners to provide food and local fresh produce to those in need including summer lunches for those 19 and younger.

### For more information:

More information including full Community Health Needs Assessments and Implementation Plans can be found on hospital pages linked on the [Hospital Report Card](#).