The MISSION of Holyoke Medical Center is to serve the health needs of the community in a high quality and efficient manner.

Holyoke Medical Center

2016 – 2019 Implementation Strategy

for 2016 Community Health Needs Assessment

Holyoke Medical Center • 575 Beech Street, Holyoke MA 01040 • 413.534.2500 • www.HolyokeHealth.com

Introduction

This implementation strategy describes how Holyoke Medical Center plans to address significant community health needs in 2016 through 2019. These needs were identified in the 2016 Community Health Needs Assessment (CHNA) published and made widely available to the public on February 25, 2016.

This implementation strategy outlines the significant community health needs described in the CHNA that Holyoke Medical Center plans to address in whole or in part. Holyoke Medical Center may amend this implementation strategy as circumstances warrant. This plan and its strategies may be refocused to account for such changes in the community landscape.

Holyoke Medical Center plays a critical role in providing healthcare services and community benefit throughout Holyoke, Chicopee, South Hadley, Granby, Easthampton, Southampton, Westhampton . West Springfield and Belchertown, serving an aggregate population of 185,000.

While the work described in the implementation strategy focuses on addressing significant health needs identified in the CHNA, other essential health programs also will continue. For more information on Holyoke Medical Center's additional programs and services, please visit www.holyokehealth.com.

About Holyoke Medical Center

The MISSION of Holyoke Medical Center is to serve the health needs of the community in a high quality and efficient manner.

What started as a 40-bed hospital in 1893 has grown to be a 198-bed facility with 1,200 employees. Each year Holyoke Medical Center admits more than 7,500 patients, while the Emergency Department currently experiences an annual volume of more than 45,000 visits.

Holyoke Medical Center is a member of Valley Health Systems, Inc. in Holyoke.

Holyoke Medical Center, in collaboration with the Coalition of Western Massachusetts Hospitals, conducted a community health needs assessment 2015/2016. The survey was conducted because the hospital wants to understand better community health needs and to develop an effective implementation strategy to address priority needs. Please click here to view the findings of the community health needs assessment.

2016 Community Health Needs Assessment Summary

Holyoke Medical Center is a member of the Coalition of Western Massachusetts Hospitals (Coalition) which also includes Baystate Medical Center and its affiliates, Mercy Medical Center, Cooley Dickinson Hospital, Shriners and Health New England. The Coalition hospitals collaborated in preparing their CHNAs.

Federal regulations require that tax-exempt hospitals provide and report community benefits to demonstrate that they merit exemption from taxation. As specified in the instructions to IRS Form 990, Schedule H, community benefits are programs or activities that provide treatment and/or promote health and healing as a response to identified community needs.

Community benefit activities or programs seek to achieve objectives, including:

- improving access to health services,
- enhancing public health,
- advancing increased general knowledge, and
- relief of a government burden to improve health.

The full Community Health Needs Assessment report conducted by Holyoke Medical Center is available at www.holyokehealth.com.

Definition of the Community Served

The HMC community, which contains 12 ZIP codes in 9 towns in Hampshire and Hampden counties, benchmarks favorably on a number of health indicators. However, health status and access problems are present. The community is aging and diversifying, driven by growth in elderly and in Asian, Black, and Hispanic (or Latino) populations. Holyoke has a comparatively large Hispanic (or Latino) population, while Chicopee and South Hadley have higher percentages of residents aged 65+. Hampshire County is growing at a slightly faster rate than Hampden County.

Hampden County reports comparatively low graduation rates and comparatively high rates of disability, particularly among youth. These factors can contribute to poverty, health care access barriers, and poor health.

Additional observations of the 2016 CHNA:

Population (2014): 185,530

- High poverty rates
- Higher crime rates than the Commonwealth of Massachusetts
- Disparities for Black and Hispanic (or Latino) residents

- More likely to be living in poverty
- Higher stroke, heart disease, diabetes, and cancer mortality rates.

Significant Health Needs Identified

The 2016 CHNA identified a number of significant health needs in the community. Those needs are summarized below. A complete description of these health needs — including the community input taken into account, the data analyzed, and the prioritization methods used — can be found in the CHNA report available at http://www.holyokehealth.com.

Access to Care
• **Lack of Affordable and Accessible Medical Care**
• **Need for Culturally Sensitive Care**
• **Need for Increased Integration and Coordination of Health and Human Services**
Dental Health
• **Lack of Access to Dental Care**
Health Behaviors
• **High Rates of Alcohol (Hampden County) and Drug Use**
• **High Rates of Unsafe Sex (Hampden County), Teen Pregnancy, and Chlamydia (Hampden County)**
Maternal and Child Health
• **Prevalent Infant Health Risk Factors (e.g., smoking during pregnancy, births to women age 40-54)**
• **Pediatric Disability (Hampden County)**
Mental Health
• **Lack of Access to Mental Health Services and Poor Mental Health Status**
Morbidity and Mortality
• **High Rates of Diet and Exercise-Related Diseases and Mortality (e.g., obesity, diabetes, heart disease)**
• **High Rates of Asthma**

• **Lung Cancer Reduction**
• **Racial and Ethnic Disparities in Disease Morbidity and Mortality (e.g., breast and prostate cancer, chronic liver disease, stroke) (Hampden County)**
Physical Environment
• **Poor Community Safety (e.g., homicide and other violent crimes)**
• **Poor Built Environment and Environmental Quality (e.g., air quality, presence of food deserts)**
Social and Economic Factors
• **Basic Needs Insecurity: Financial Hardship, Housing, and Food Access**
• **Low Educational Achievement**

Significant Health Needs the Hospital Will Address

Identified Need:

- **High Rates of Asthma**

Asthma Initiatives

Holyoke Medical Center (HMC) has identified that 689 children were seen in our Emergency Department in the last year for asthma related illnesses. Asthma prevalence is higher in children who are Puerto Rican. In general, this disadvantaged at-risk population experiences above average rates of Emergency Department visits. (Holyoke Medical Center Community Health Needs Assessment, Feb 2016).

According to the most recent estimates from the U.S. Census Bureau, 40.3% of Holyoke families with children under 18 years of age live below the Federal poverty level. For female-headed households with children under 5, this figure rises dramatically to 81.3%. Therefore, almost half of all Holyoke children live in poverty. Despite the higher rates of the disease, access to medical care for asthma is often lower among minority and disadvantaged populations.

There is a strong possibility that many days are missed from school by this population due to poorly controlled asthma. Missing school contributes to lower graduation rates and the ability for this population to break out of the cycle of poverty.

Holyoke Medical Center is proposing an intervention that will take place in our Emergency Department specifically with our pediatric asthma patients. During the initial encounter the patient/parent will be asked to answer the seven questions of the Childhood Asthma Control Test. The score will trigger interventions in the ED and referral to their primary care provider for disease specific follow up. This intervention model will trigger the pediatrician to institute an action plan for the child and parent that can be shared with community partners such as schools and afterschool programs. The Childhood Asthma Control Test is a widely used tool that helps the healthcare provider determine if the child's asthma symptoms are under control. The Asthma Control Test tool will help providers capture information such as days missed from school, ED visits for asthma exacerbations and identify triggers. The provider can then, with the parent, determine the best treatment. An educational program will be developed to target the parents of children with asthma that will include the importance of reducing triggers such as cigarette smoke in the home. Educating parents and better controlling asthma will result in less ER visits and healthier lifestyles.

Documentation of the Asthma Control Test distribution and usage will be done through the ED electronic medical record system. The primary care physician/pediatrician will be notified of any of their patients who fail the Asthma Control Test.

The stakeholders are Emergency Department physicians and staff, WMPA Pediatrics, Holyoke Health Center Pediatrics, and Holyoke Pediatrics will determine when and by whom the Asthma Control Test is administered and how to share the results of the test.

Since our population is an elevated English as a Second Language (ESL) population, all forms will be available in different languages or an interpreter will be provided at the bedside with the triage RN. This is a barrier for many health concerns with Holyoke's population and a translator is always available in-house or via telephone. Education of staff could be managed by a flexible/off shift education schedule and adding the education to our Annual Competency Education (ACE) Day.

Pediatric asthma is impacted by the primary environment where the child spends most of their time. Addressing triggers with parents/caregivers may reveal the smoking status of individuals at the child's home. At the same time, smoking cessation counseling will be provided.

Anticipated Impact: Reduction of Emergency Department Asthma visits

Plan to Evaluate Impact: Utilization of the Childhood Asthma Control Test as described above and Emergency Department data.

Resources Hospital Plans to Commit: One FTE per day in ER and electronic medical record system

Collaborations: Holyoke Health Center, WMPA, Holyoke Pediatrics

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Identified Need:

- **Lung Cancer rate reduction**

Lung Cancer Initiative: Lung Cancer Screening

CT Lung Cancer Screening Program

We are providing CT Lung Cancer Screening Services at Holyoke Medical Center.

Yearly lung screening with low dose CT (LDCT) has proven to be effective with early detection, leading to better outcomes for patients who are at high risk for developing lung cancer.

LDCT lung screening is recommended for the following groups of people who are at high risk for lung cancer:

Category 1: People 55-77 years old who have smoked at least an average of one pack a day for 30 years. This includes people who still smoke or have quit within the past 15 years.

Category 2: People aged 50-77 who currently or in the past have smoked at least one pack a day for 20 years. They must also have at least one other risk factor for lung cancer, not including exposure to second hand smoke.

Risk factors for lung cancer include having cancer in the past, emphysema, pulmonary fibrosis, a family history of lung cancer and exposure to certain substances (including asbestos, arsenic, beryllium, cadmium, chromium, diesel fumes, nickel, radon, silica and uranium). Your healthcare provider can help you determine if you have one of these other risk factors.

Studies have shown that LDCT lung screening can lower the risk of death from lung cancer by 20% in people who are high risk.

LDCT lung screening is one of the easiest screening exams. The exam is completed within 10 seconds. No medications are used. You can eat before and after the exam. You must, however, be able to hold your breath for six seconds.

Anticipated Impact: Lower the risk of death from lung cancer

Plan to Evaluate Impact: Follow results of patient scans every three (3) months; or recommendation of Radiologist

Resources Hospital Plans to Commit: Radiologist, technologist for scan, PCP and Nurse Navigator

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Identified Need:

- **High Rates of Diet and Exercise-Related Diseases and Mortality (e.g., obesity, diabetes, heart disease)**
- **Racial and Ethnic Disparities in Disease Morbidity and Mortality**
- **Basic Needs Insecurity: Financial Hardship, Housing, and Food Access**

Secondarily:

- **Need for Culturally Sensitive Care**

***Let's Move!* Holyoke 5-2-1-0**

The National League of Cities (NLC) recognized the City of Holyoke for recent completion of key health and wellness goals for *Let's Move!* Cities, Towns and Counties (LMCTC). This recognition is a major component of First Lady Michelle Obama's comprehensive *Let's Move!* initiative, dedicated to solving the childhood obesity epidemic within a generation.

The City of Holyoke was recognized for having an active interagency collaboration in early care and education programs, increasing participation in the School Breakfast Program and undertaking initiatives to increase physical activity, a collaboration that Holyoke Medical Center has now/recently joined.

A major component of *Let's Move!* Holyoke 5-2-1-0 is the development of individualized Healthy Living Plans (HLPs) which survey the current diet and physical activity of children and adults. That information is then used as an aid to develop healthy living goals to improve overall health. The program focuses on encouraging participants to share the same four healthy habits of **"5 2 1 0"** everyday:

5 – fruits and veggies
2 – hours or less of recreational screen time*
1 – hour or more of physical activity
0 – sugary drinks, more water and low-fat milk

* Keep TV/computer out of bedroom. No screen time under the age of 2

Holyoke Medical Center is also partnering with Western Mass Physician Associates (WMPA), its sister organization that provides primary and pediatric physician care, and others on childhood obesity prevention providing educational outreach, supporting materials and training on healthy eating and physical activity for physicians working with children and their families.

As part of the 5-2-1-0 program, Holyoke Medical Center's Birthing Center will continue its work to increase breastfeeding rates of new mothers, a program that has been in effect for over 15 years.

HMC will also be encouraging patients, visitors, and employees and their families in living healthy, active lives.

Identified Need:

- **Need for Culturally Sensitive Care**
- **Low Educational Achievement - Children**
- **High Rates of Diet and Exercise-Related Diseases and Mortality (e.g., obesity, diabetes, heart disease)**

Holyoke Medical Center (HMC) has seen that often the biggest changes can happen when you start with children. With that in mind HMC has decided to address these needs. It is hoped that working with children will not only change their attitudes and habits as well as provide education to them, but their changes will move through the family and change family attitudes and habits as well. The hospital will work with elementary age children at existing after school programs throughout the City of Holyoke and support of the school system Basic Needs Committee.

- *Basic Needs Committee* – HMC will work with the schools, along with social service agencies to address the "Basic Needs" of the children in Holyoke with programs such as:
    - Fill the Backpack Initiative
    - Coats, gloves and scarves for children in the system
    - Walk the children to the bus (no child should be alone)
    - Toys for Tots drive

- *Homework House* – Homework House provides free after-school tutoring and mentoring for children in Holyoke who are at-risk for academic failure and dropping out of school. They help elementary students improve their literacy skills so they can become productive members of the community. They work towards rekindling the children's interests in learning and self-improvement. Services are provided to school-age children without regard to race, religion, ethnicity, or gender.

  HMC will be providing tutors to help with homework, emphasizing basic skills and academic assistance. They are committed to giving at least 2 hours one day a week, Monday to Thursday, every week during the school year.

- *Boys & Girls Club* – The Boys & Girls Club of Greater Holyoke offers a School-Aged Childcare Program year-round at their main center as well as operating satellite units in several Holyoke Housing Authority communities: The Toepfert Apartments, Lyman Terrace, Beaudoin Village, and the Churchill Homes. These units enable the Club to serve children where they are … in their neighborhoods.

The Boys & Girls Club serves youth who are between the ages of 6 and 13 and are in at least the first grade. The program operates every afternoon after school, and all day on school closing and vacation days.

The Boys & Girls Club staff have expressed that their greatest need is for gym, exercise and dance programs for the children because they do not have physical activity at home. HMC has staff members who were exercise/dance teachers and are pleased to be able to offer their services to the Boys & Girls Club.

Anticipated Impact: Increased educational levels of the student

Plan to Evaluate Impact: Measurement will include accomplishments, staying in school, and improvement in grades

Resources Hospital Plans to Commit: Staff time

Collaborations: Holyoke Public Schools, Homework House, Boys & Girls Club

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Identified Need:

- **Nutrition in the Cancer Patient**

Upon admission to the Oncology Department, the patients will be evaluated by the Patient Navigator. Diet, food and weight will be addressed and continued to be monitored. The Oncology Screening tool for measuring distress will be completed. If an issue or concern occurs, the patient will be given Ensure and a Nutritionist to evaluate as necessary.

Anticipated Impact: To give access to care for all Oncology patients with lack of food access or financial hardship

Plan to Evaluate Impact: Monitor the health of the cancer patients and maintain weight.

Resources Hospital Plans to Commit: Staff education through admission and first assessment.

Collaborations: Staff in-house, Oncology Staff, Outpatient Staff, PCP

Identified Need:

• Low Educational Achievement – Teens and Young Adults

- *Career Point* – Holyoke Medical Center sponsors fifteen (15) youth for the Summer Program. The program provides educational opportunities as well as a stipend to each youth for six weeks during the summer months.

- Encouraging, specifically low income, students to pursue health careers
  - HMC is developing opportunities for our staff to speak with students about career choices. This is being done at Holyoke High School and Peck Junior High. As these programs are refined other schools will be added.

- Expanded Training for Nursing Students
  - Holyoke Community College where two HMC advanced degree nurses teach one 2 hour class per year for the Associate RN Degree program on managing conflict, teamwork and moving forward as a new graduate
  - American International College where two HMC advanced degree nurses teach one 2 hour class per year for the BSN Degree program on managing conflict, teamwork and moving forward as a new graduate

Anticipated Impact: Encourage teens and young adults to consider careers in healthcare

Plan to Evaluate Impact: Work with guidance counselors to create tracking mechanism for students furthering their education in healthcare professions

Resources Hospital Plans to Commit: Staff time

Collaborations: Career Point, Holyoke Public Schools and area colleges

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Identified Need:

- **High Rates of Diet and Exercise-Related Diseases and Mortality (e.g., obesity, diabetes, heart disease)**
- **Other Identified Needs – Aging issues**

There is a large senior population in Holyoke and the surrounding communities. To help this age group continue to have healthy lives, HMC is implementing a new program called Gaining Health Improvements (GHI).

Programs will be offered each month. One will be on Heart/Cardiac related issues, one on Diabetes related issues and one will be a rotating topic from month to month. A more formal evaluation tool is being developed for better on-going assessment of popular programs.
HMC has expanded to long term care facilities to educate staff and the community.

Anticipated Impact: Increased awareness of senior health issues

Plan to Evaluate Impact: Formal evaluation tool is being developed for better assessment of programs

Resources Hospital Plans to Commit: Staff time

Collaborations: Holyoke Senior Center, Senior Living Communities, Skilled Nursing Facilities

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Along with these new Community Benefit Initiatives, Holyoke Medical Center will address the following needs with on-going programs that have proved to be successful over the years.

1. **Access to Care**
   - **Lack of Affordable and Accessible Medical Care**
   - **Need for Culturally Sensitive Care**

   ➢ The Massachusetts Society for the Prevention of Cruelty to Children will no longer be providing Early Intervention services. While Criterion Child Enrichment in South Hadley and the May Center in West Springfield will continue Early Intervention services, the absence of a home-town agency will have an impact on our at-risk pediatric community.

   - Holyoke Medical Center's Speech and Hearing Department is establishing a consistent presence at Holyoke Health Center to provide speech-language screenings, consult with staff, and provide education and training, as needed, to assure that children at risk for speech-language-learning delays are referred to Early Intervention programs, Holyoke Public School programs, or to Holyoke Medical Center Speech and Hearing when medically necessary. The target group is 18 months to five years old

   - The Holyoke Health Center has also asked us to work with their staff on education and training regarding hearing screening methods for young children. They have also asked for our staff to participate in parent education programs to teach speech-language development milestones, and ways to create language-rich environments necessary for developing literacy skills.

- Holyoke Medical Center hosts and provides training class for area speech therapists, teachers, and classroom aides who work with children with speech generative devices, manufacturer training on computer updating for vocabulary, syntax, expanded use of devices.

Anticipated Impact: Better identification of children with hearing problems

Plan to Evaluate Impact: Track the number of children screened; number requiring referral to Early Intervention; to public school; to Holyoke Medical Center, and/or to other medical specialties.

Resources Hospital Plans to Commit: Staff time

Collaborations: Holyoke Health Center. Once we have a sense of how this plan works at the Health Center, we will consider approaching Holyoke Pediatrics, Chicopee Medical Center, Fairview Pediatrics and Western Mass Pediatrics regarding a similar community benefit service.

- Holyoke Medical Center's Oncology Department has begun offering a Spanish language cancer support group. Other support groups are now being identified for providing a Spanish language option.

Anticipated Impact: Increased participation of Spanish-speaking patients

Plan to Evaluate Impact: Tracking attendance levels

Resources Hospital Plans to Commit: Meeting space and Spanish speaking staff

Collaborations: Holyoke Health Center

- Creating extended operational hours:
  - The Women's Center is extending its hours and opening up slots for mammograms on Saturday mornings, and Wednesdays from 4:00 p.m. to 7:00 p.m.
  - Expand operating hours for Pulmonary Rehabilitation on weekdays after 4:00 p.m. and Saturday mornings

Anticipated Impact: Increased detection of Cancer; more availability of appointments for Pulmonary Function Tests, Pulmonary Rehabilitation

Plan to Evaluate Impact: Amount of appointments

Resources Hospital Plans to Commit: Staff and indirect costs

Collaborations: No collaboration at this point

- Cancer Care Navigation:
  - Holyoke Medical Center Oncology patients will be navigated with assistance if needed to obtain: Insurance, Primary Care Physicians, Housing, Medications and Daily Living Needs.

Anticipated Impact: Give patient access to care

Plan to Evaluate Impact: Navigator/Social Worker assure patient has access to care

Resources Hospital Plans to Commit: Staff and indirect costs

Collaborations: No collaboration at this point

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2. Mental Health

• Lack of Access to Mental Health Services and Poor Mental Health Status

For many years the Holyoke Medical Center's Behavioral Health Staff have been responding to the Mental Health needs of Holyoke and the surrounding communities in many ways. Three of the most comprehensive and successful programs have been the following:

- Uncompensated legal proceedings to commit patients to inpatient psychiatric treatment when they are assessed to be a danger to themselves or members of the community based on psychiatric symptoms. These can include reviewing intake information and files, telephone calls with paralegals, drafting the commitment papers, petitions and/or motions, letters to court, court appearances by HMC staff, finalizing the petitions and filing, reviewing, signing, etc
- Provide free van transportation to members of the community who do not have their own transportation and are in need of Partial Hospitalization or Intensive Outpatient levels of care for mental health treatment. Transportation is provided to and from the program five days a week.
- Holyoke Medical Center staff performs liaison work with agencies in the mental health community in order to improve the provision of behavioral health/psychiatric services for community members.
- Holyoke Medical Center continues to subsidize both the inpatient and outpatient Behavioral Health Services.

Anticipated Impact: Increased identification of patients with mental and behavioral health conditions and increased access to mental health services

Plan to Evaluate Impact: Number of legal proceedings, van usage and meetings with community agencies

Resources Hospital Plans to Commit: Staff time and transportation costs

Collaborations: River Valley Counseling Center and other area mental health agencies

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3. Morbidity and Mortality

- **High Rates of Diet and Exercise-Related Diseases and Mortality (e.g., stroke, diabetes, heart disease)**

Stroke Services – **Holyoke Medical Center (HMC) — in 2015** received three prestigious national and state awards for excellence in quality of stroke care in Massachusetts from the American Stroke Association, the MA Department of Public Health (DPH), and the Paul Coverdell National Acute Stroke Registry and Centers for Disease Control and Prevention (CDC),. These awards recognize hospitals that are committed to consistently providing quality stroke care. Additionally, HMC was ranked #1 in Massachusetts out of 22 Medium Volume Hospitals, providing 99 percent Defect-Free Care by SCORE (Stroke Collaborative Reaching for Excellence), a state-wide quality improvement program.

HMC has participated in the American Stroke Association (ASA) "Get with the Guidelines" Quality Improvement Program since 2005. The Stroke Service received the highest recognition from the ASA and has consistently sustained an award status since 2007. In June of 2015, HMC was awarded the Gold Plus and Target Stroke Honor Roll Elite Plus. These awards recognize HMC for meeting quality achievement measures for the rapid diagnosis and treatment of stroke patients. Quality measures include aggressive use of medications and risk-reduction therapies aimed at reducing death and disability and improving the lives of stroke patients. The Target: Stroke Honor Roll Elite Plus designation reflects the efficiency and ability to administer the drug IV TPA (clot-buster) for ischemic stroke to our patients within 45 minutes of arrival to the hospital.

HMC has achieved a rate of 100 percent in performing the NIH Stroke Scale Neurological Assessment on all stroke patients from January 2014 to December 2014. The NIHSS is an evidence-based tool used to provide a quantitative measure of stroke-related neurological deficits.

Community education is a priority for the HMC Stroke Service. Throughout the year several community educations programs and lectures are provided to the general public or specific healthcare professionals, such as EMS and Nursing School Programs. These programs are offered on campus, at local senior centers, for various organizations, schools, health fairs, and through many local publications (print, radio, and TV). The staff of the Stroke Service takes great pride they offer out in the community. An enhanced focus is on stroke prevention, treatment, recognizing the signs and symptoms of stroke as well as the risk factors of stroke, seeking help FAST and calling 911 when symptoms first begin.

The Stroke Service also partners with the HMC Speech and Hearing Center. The Speech and Hearing Center conducts a Stroke Support Group which meets every week on Thursday mornings for two hours.

It is open to the public and has been in effect for over 30 years. It includes stroke survivors and their caregivers. These meetings consist of structured communication skills / language activities for the group, along with strategies for communicating at home with family and daily living community situations. The group meeting also consists of social activities to help stroke survivors become more at ease in social situations by developing new skills to supplement those lost by their stroke.

These programs will continue to be supported by HMC.

Anticipated Impact: To Improve Stroke survival rates and outcomes.

Plan to Evaluate Impact: Monitoring hospital stroke admission rates.

Resources Hospital Plans to Commit: Staff time dedicated to these programs.

Collaborations: MA Department of Public Health, American Stroke Association, the Paul Coverdell National Acute Stroke Registry and Centers for Disease Control and Prevention (CDC).

Diabetes Classes - HMC has been offering Diabetes Education classes for many years and will continue to do so. As noted earlier in this Plan these classes are also being expanded as part of the Gaining Health Improvements program.

Anticipated Impact: Better disease management for Diabetic patients

Plan to Evaluate Impact: Lower rates of Diabetes-related conditions

Resources Hospital Plans to Commit: Staff time

Collaborations: Holyoke Senior Center, Senior Living Communities and Skilled Nursing Facilities

4. Other Identified Needs:

- **Aging Issues**
  Holyoke Medical Center provides hearing services to Loomis Communities and other Senior Living Communities including:
- Various events throughout year to support families and patients using speech generating computer devices, as well as providing training for professionals working with patients/devices

  -One hour presentations with question and answer sessions regarding common causes of hearing loss, hearing aid benefits and limitations, coping and communication strategies.

  -Annual health fairs; table to educate on hearing loss, hearing aids, medical conditions, wax, speech and swallowing issues in the elderly

  -Provides hearing screenings and education to residents

-Provides hearing aid services such as cleaning and repairs

Anticipated Impact: Increased acceptance and awareness of hearing issues in the senior population

Plan to Evaluate Impact: Surveying the Senior Living staff on hearing aid acceptance and usage by residence

Resources Hospital Plans to Commit: Staff time

Collaborations: Loomis Communities and other Senior Living Communities

Needs Not Being Addressed

Health Care Need Category	Identified Unmet Health Care Needs of the Residents of the HMC Service Area	Reason Need Not Being Addressed
Dental Health	Lack of Access to Dental Care	This service is being provided by the Holyoke Health Center
Health Behaviors	High Rates of Alcohol, Tobacco, and Drug Use	These needs are being met via HMC's sister organization River Valley Counseling Center
	High Rates of Unsafe Sex, Teen Pregnancy, and Chlamydia	
Maternal & Child Health	Prevalent Infant Health Risk Factors (e.g., smoking during pregnancy, lack of prenatal care)	Have not discovered an avenue at this time to capture pre-natal patients
	Pediatric Disability	Do not have Pediatric services in-house
Physical Environment	Poor Community Safety (e.g., homicide and other violent crimes)	Holyoke Safe Neighborhoods Initiative already addresses a number of these issues.
	Poor Built Environment and Environmental Quality (e.g., air quality, presence of food deserts)	
Social & Economic Factors	Basic Needs Insecurity: Financial Hardship, Housing and Food Access	The South Holyoke Safe Neighborhood Initiative already addresses a number of these issues.

Implementation Strategy Adoption

This implementation strategy was adopted by the Holyoke Medical Center Board of Trustees on February 25, 2016.