Our Commitment to Community Health

Central Vermont Medical Center (CVMC) is the primary health care provider for 66,000 people who live and work in Central Vermont. For more than 50 years, we have been dedicated to our Mission: Central to our community. Caring for a lifetime.

CVMC works closely with other regional health providers to meet the health care needs for Central Vermonter. Our professional staff of more than 200 physicians and 70 advanced practice providers representing 25 medical specialties provides 24-hour emergency care, and a full spectrum of inpatient and outpatient services.
Executive Summary

The Patient and Protection and Affordable Care Act requires non-profit hospitals to conduct a Community Health Needs Assessment (CHNA) every three years and to adopt an Implementation Strategy to meet the significant needs identified in the assessment. The University of Vermont Health Network Central Vermont Medical Center reports compliance with these requirements annually on Schedule H (Form 990), which provides information on the organization’s activities and policies of community benefit.

The 2019 CHNA was conducted in collaboration with THRIVE, the regional Accountable Community for Health (see page 12 for full list of THRIVE membership). This multi-agency coalition, made up of health providers, social service agencies, government, civic, and religious entities, and numerous other community partners, is dedicated to improving health for the residents of Washington and Northern Orange Counties. THRIVE members played an integral role in overseeing data collection and reviewing findings to determine community health priorities based on the CHNA study.

The CHNA data collection and review process, overseen by representatives from CVMC and THRIVE, resulted in the identification of five top community health needs. Of those five, the Community Action Network (CAN), a subcommittee of THRIVE, and CVMC Clinical and Administrative Leadership Members (CALM), identified six target areas to include in the Implementation Strategy. This Implementation Strategy details what The University of Vermont Health Network Central Vermont Medical Center will address for each of those six target areas. Outcomes for each of the areas will be tracked and reported over the next three years.
CHNA Summary

The comprehensive 2019 CHNA included an in-depth review of primary and secondary data. Health trends, socio-economic statistics, and stakeholder perceptions, among other information were analyzed to inform community health planning. Primary study methods were used to solicit input from health care consumers and key community stakeholders representing the broad interests of the community. Secondary study methods were used to identify and analyze statistical demographic and health trends. Community engagement was an integral part of the 2019 CHNA with wide participation from nearly 1,500 community stakeholders who participated in surveys, focus groups, planning meetings, and other dialogue.

Specific CHNA study methods included:
- An analysis of secondary data sources, including national and state health statistics, demographic and social measures, and health care utilization data
- A Community Member Survey completed by 1,429 residents collected community perspectives on health concerns, barriers to care, recommendations and related insights
- Focus Groups with 33 health care consumers informed action planning and strategies to address community health priorities
- Prioritization of health needs in collaboration with THRIVE CAN members and CVMC CALM leaders.

Five community needs were identified in the 2019 assessment:
(in alphabetical order)

- **Chronic Disease Burden** (heart disease, stroke, hypertension, hyperlipidemia, obesity)
- **Healthy Lifestyles and Risk Behaviors** (healthy diet, smoking, activity)
- **Mental Health**
- **Social Influencers of Health** (housing, transportation, economic stability, food security)
- **Substance Use Disorders**

The 2019 CHNA prioritized health needs align with the VT DOH priorities, promoting collaboration between public health, hospital, and community based organizations.

<table>
<thead>
<tr>
<th>2019 CHNA Priority Health Needs</th>
<th>VT DOH 2019-2023 SHIP Priorities</th>
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</thead>
<tbody>
<tr>
<td>Chronic Disease Burden</td>
<td>Chronic Disease Prevention</td>
</tr>
<tr>
<td>Healthy Lifestyle and Risk Behaviors</td>
<td>Child Development Oral Health</td>
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<td>Mental Health</td>
<td>Mental Health</td>
</tr>
<tr>
<td>Substance Use Disorders</td>
<td>Substance Use Prevention</td>
</tr>
<tr>
<td>Social Influencers of Health</td>
<td>SDOH: Housing, Transportation, Food, Economic Stability</td>
</tr>
</tbody>
</table>
Prioritization Process

CVMC CALM members and THRIVE CAN members met to review CHNA research findings and community input to determine priority health needs for Washington County. Through facilitated dialogue, participants considered contributing social issues, existing community resources, gaps in services, and expertise in determining recommendations for priority health issues. Discussion culminated in the identification of the following health needs (listed in alphabetic order), that if addressed, would have wide-sweeping community impact:

- Financial stability
- Food security
- Healthy Lifestyles
- Affordable Housing
- Mental Health
- Substance Abuse

Committee members used a prioritization matrix to rank the issues based on four independent criteria: scope of the issue, severity of the issue, ability to impact the issue, and community readiness to address the issue.

Central Vermont Medical Center used this information in conjunction with CHNA findings and stakeholder feedback to determine which priorities to focus community health improvement efforts over the 2019-2022 reporting cycle.

Based on CVMC’s existing expertise and resources, the medical center is best positioned to lead efforts in the six target areas identified within this implementation strategy plan.

The Community Action Network (CAN) and CVMC Representatives including CVMC Clinical and Administrative Leadership Members (CALM) selected six target areas for inclusion in the 2019 CHNA Implementation Strategy:

(in alphabetical order)

- Access to Primary & Specialty Care
- Care of Stroke Patients
- Heart Disease
- Mental Health Care
- Social Influencers of Health
- Substance Use Disorders
Access to Primary and Specialty Care

Research shows that improved access to primary care is associated with positive health outcomes.* Vermont is challenged by an aging primary care workforce and an aging population.** We seek to improve access to primary and specialty care using the tactics listed below.

**TACTIC # 1**

Ambulatory Practice Transformation. The path our practices are on to better meet the care needs of our community. This involves process improvement with Epic implementation, improving communication with the hospital and specialists, right-skilling team members and improved integration of other members of the care team such as social work, care managers, and clinical coordinators.

**POPULATION:**
Our Community

**PARTNERS:**
CVMC leadership
Primary and Specialty Care Providers and Practice Staff
CVMC Community Health Teams

**TACTIC # 2**

Expanding care coordination activities in primary care for people with chronic conditions.

**POPULATION:**
Our patients with chronic conditions

**PARTNERS:**
CVMC Leadership
Primary Care Providers and Practice Staff
Community Health Teams
Central Vermont Home Health & Hospice
Washington County Mental Health
Central Vermont Council on Aging
One Care Vermont

**TACTIC # 3**

Improve access to care through implementation of telehealth services for primary and specialty care.

**POPULATION:**
Our community

**PARTNERS:**
CVMC Leadership
Primary and Specialty Care Providers and support staff
Central Vermont Home Health & Hospice
UVM Health Network Telehealth Staff

Care for Stroke Patients

Acute Stroke Ready Hospital (ASRH) Certification provided through a partnership between the American Heart Association/American Stroke Association and The Joint Commission recognizes hospitals that meet standards to support better outcomes for stroke care as part of a stroke system of care.

**TACTIC # 1**

Through collaboration with UVM Health Network and with the support of telemedicine services, CVMC is pursuing becoming certified as an Acute Stroke Ready Hospital. This will help us standardize the care of patients presenting to our emergency department with signs/symptoms of a stroke and will expedite their transfer, if needed, to a higher level of care.

**POPULATION:**
All adult patients presenting with signs/symptoms of stroke

**PARTNERS:**
CVMC Leadership
UVM Medical Center Stroke Program Director
UVM Medical Center MD Stroke Champion
Emergency Medical Services (EMS)
CVMC Emergency Department Director, Emergency Department Providers, Director of Hospitalists, UVMMC and CVMC Neurology, Nursing Directors/Managers, Nursing Education, Lab, Diagnostic Imaging, Care Management, Rehabilitation Services, Palliative Care
CVMC Quality Management staff
Heart Disease

Heart Disease is identified as the number one cause of death in our region and nationally. CVMC will continue to pursue ways to improve outcomes of patients with heart disease.

**TACTIC # 1**

Expand Cardiology heart failure inpatient consultation service to be available for all patients with newly diagnosed heart failure and anyone admitted with recurrent symptoms of heart failure.

**POPULATION:**
Patients admitted to CVMC with heart failure

**PARTNERS:**
- CVMC Leadership
- CVMC Cardiology, hospitalist and emergency department providers and staff
- Central Vermont Home Health and Hospice
- UVM Health Network Department of Cardiology

**TACTIC # 2**

Improve the transition of patients admitted with heart failure to the outpatient setting by creating more timely connections to home health, telehealth, and cardiology.

**POPULATION:**
Patients admitted to CVMC with heart failure.

**PARTNERS:**
- CVMC Leadership
- CVMC Cardiology, hospitalist, emergency department and care management providers and staff
- Central Vermont Home Health & Hospice
- UVM Health Network Department of Cardiology
Mental Health Care

Access to mental health services and treatment was identified as the #2 health challenge in our survey. 26% of Washington County adults are diagnosed with depression and 15% of Washington County teenagers report they have a suicide plan.

**TACTIC # 1**

Provide the analysis, engagement, and planning necessary to design and create a UVM Health Network adult inpatient psychiatric facility/unit that will substantially improve access to adult inpatient mental health care as part of an integrated system of care in Vermont.

**POPULATION:**
Adults requiring acute inpatient psychiatric services

**PARTNERS:** see table below for full list of Psychiatric Inpatient Planning Stakeholders (PIPS)

**TACTIC # 2**

Incorporate mental health screening and mental health services into primary care.

**POPULATION:**
Residents of Washington County accessing CVMC primary care services.

**PARTNERS:**
CVMC Leadership, CVMC Primary Care Clinics, UVM Health Network, Washington County Mental Health

**PSYCHIATRIC INPATIENT PLANNING STAKEHOLDERS (PIPS)**

<table>
<thead>
<tr>
<th>Alyssum</th>
<th>Lamoille County Sheriff's Department</th>
<th>Vermont Center for Independent Living</th>
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<tr>
<td>Another Way Vermont</td>
<td>National Association of Mental Illness</td>
<td>Vermont Department of Corrections</td>
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<td>Brattleboro Retreat</td>
<td>Northeast Kingdom Human Services</td>
<td>Vermont Department of Mental Health</td>
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<td>Central Vermont Home Health &amp; Hospice</td>
<td>Northeastern Vermont Regional Hospital</td>
<td>Vermont Legal Aid</td>
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<td>Central Vermont Medical Center</td>
<td>Pathways Vermont</td>
<td>Vermont Legislature Representatives</td>
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<td>City of Barre</td>
<td>Rutland Regional Medical Center</td>
<td>Vermont Psychiatric Association</td>
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<td>City of Montpelier</td>
<td>Town of Berlin</td>
<td>Vermont Psychiatric Care Hospital</td>
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<td>Disability Rights Vermont</td>
<td>University of Vermont Health Network</td>
<td>Vermont Psychiatric Survivors</td>
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<td>Downs Rachlin Martin, PLLC</td>
<td>Vermont Association of Hospitals and Health Systems</td>
<td>Washington County Mental Health Services</td>
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<td>Howard Center</td>
<td>Vermont Care Partners</td>
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# Social Influencers of Health

Access to healthy foods, housing, transportation and economic stability impact a person’s health. Residents of Washington County have low rates of consuming healthy foods, high rates of chronic disease burden, difficulty accessing transportation services and a high housing cost burden resulting in homelessness or marginal housing for many individuals.

## TACTIC # 1

**Community Collaboration**

CVMC serves as the convener organization for THRIVE, the Washington County Accountable Community for Health, in supporting needs identified in this CHNA.

**POPULATION:**

Residents of Washington County and surrounding areas

**THRIVE COMMUNITY PARTNERS:** See next page for full list.

CVMC Leadership

## TACTIC # 2

**Food Security**

CVMC partners with Vermont Youth Conservation Corps to provide free, fresh produce and other staples to community members every month. Through this program the hospital also provides a social gathering space to support education and conversation around healthy food.

**POPULATION:**

Residents of Washington County and surrounding areas

**COMMUNITY PARTNERS:**

CVMC Leadership

Vermont Youth Conservation Corps

Vermont Foodbank

Capstone Community Action

Hunger Free Vermont

## TACTIC # 3

**Homelessness and Affordable Housing**

CVMC participates in and supports finding solutions to end homelessness in Central Vermont and surrounding areas as part of the THRIVE Accountable Community for Health.

**POPULATION:**

Residents of Washington County and surrounding area

**THRIVE COMMUNITY PARTNERS:** See next page for full list

CVMC leadership
# Social Influencers of Health

## TACTIC # 4

### Transportation

CVMC participates in and supports finding solutions for barriers to transportation for residents of Central Vermont and the surrounding area as part of the THRIVE Accountable Community for Health.

### POPULATION:

Residents of Washington County and surrounding area

### THRIVE COMMUNITY PARTNERS: see list below

#### THRIVE COMMUNITY PARTNERS:

<table>
<thead>
<tr>
<th>Another Way Vermont</th>
<th>Clara Martin Center</th>
<th>Montpelier Community Justice Center</th>
<th>Vermont Agency of Human Services</th>
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<tbody>
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<td>Community College of Vermont</td>
<td>Montpelier Police Department</td>
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<td>Vermont Center for Independent Living</td>
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<td>Vermont Department for Children and Families</td>
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<td>Northern Vermont Area Health Education Center</td>
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<td>Norwich University</td>
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<td>Building Bright Futures</td>
<td>Good Samaritan Haven</td>
<td>OneCare Vermont</td>
<td>Vermont Department of Mental Health</td>
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<td>Capstone Community Action</td>
<td>Greater Barre Community Justice Center</td>
<td>Pathways Vermont</td>
<td>Vermont Department of Vermont Health Access</td>
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<td>Green Mountain Natural Health</td>
<td>People’s Health &amp; Wellness Clinic</td>
<td>Vermont Food Bank</td>
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<td>Central Vermont Council on Aging</td>
<td>Green Mountain Transit</td>
<td>Planned Parenthood of Northern New England</td>
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<td>Green Mountain United Way</td>
<td>Prevent Child Abuse Vermont</td>
<td>Washington Central Supervisory Union (U-32)</td>
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<td>Washington County Youth Service Bureau</td>
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<td>Christ Church</td>
<td>City of Montpelier</td>
<td>Vermont Affordable Housing</td>
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Substance Use Disorders

Residents named substance abuse including alcohol, opioid, prescription medications and marijuana as the top community health issue in this survey. Washington County adults and teens have high rates of binge drinking and marijuana use, and deaths from opioids continue to climb.

**TACTIC # 1**

CVMC and members of Washington County Substance Abuse Regional Partnership (WCSARP), were awarded a federal grant through HRSA to respond to the opioid crisis in the county’s communities. In conjunction with WCSARP, CVMC is working to evolve the regional partnership to improve the prevention of, treatment for, and recovery from opioid use disorder.

**POPULATION:**
Residents over age 12 residing in Washington County

**PARTNERS:**
CVMC Leadership, CVMC Emergency Department Clinicians and support staff, WCSARP (see full list below)

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**TACTIC #2**

CVMC actively monitors hospital and outpatient provider opioid prescribing, encouraging safe prescribing and compassionate tapering of those on chronic opioids. CVMC is also working to improve our harm reduction strategies and access to treatment for those abusing all substances and medications.

**POPULATION:**
All residents in our community

**PARTNERS:**
CVMC Leadership, providers and staff in practices and the hospital, CVMC medication assisted treatment “MAT” teams, UVM College of Medicine Area Health Education Centers, WCSARP

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**WASHINGTON COUNTY SUBSTANCE ABUSE REGIONAL PARTNERSHIP (WCSARP):**

<table>
<thead>
<tr>
<th>Vermont Recovery Network</th>
<th>Clara Martin Center</th>
<th>Treatment Court</th>
<th>Green Mountain United Way</th>
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<tr>
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<td>Another Way Inc.</td>
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<td>Barre Interfaith Group</td>
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<td>Blue Cross Blue Shield of VT</td>
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<td>Valley Vista</td>
<td>Vermont Recovery Network</td>
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<td>Cntr for Behav. Health Integration</td>
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<td>Barre Supervisory Union</td>
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<td>Writers for Recovery</td>
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The Implementation Strategy is a three-year document, which will be tracked and monitored by an internal workgroup at the University of Vermont Health Network Central Vermont Medical Center. Annual updates will be posted on the UVMHN Central Vermont Medical Center website and reported to the IRS and Tax Form 990.

For more information, please contact the Central Vermont Medical Center Chief Medical Office at 802-371-4107.