



Community Health Needs Assessment (CHNA) Implementation Strategy

Fiscal Years FY23-25 - Updated April 2024



Saint Mary's Hospital
Trinity Health

Saint Mary's Hospital completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by authorized body of the Trinity Health Of New England Board on 9-26-2022.

Saint Mary's Hospital performed the CHNA in adherence with applicable federal requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and by the Internal Revenue Service (IRS). The assessment considered a comprehensive review of secondary data analysis of patient outcomes, community health status, and social determinants of health, as well as primary data collection, including input from representatives of the community, community members and various community organizations.

The complete CHNA report is available electronically at:

<https://www.trinityhealthofne.org/about-us/community-benefit/community-health-needs-assessments>

or printed copies are available upon request at:

Department of Community Health and Well Being, Trinity Health Of New England, 56 Franklin St. (Xaiver 5th Fl.), Waterbury, CT 06706.

Our Mission and Core Values

To serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities. Guided by our charitable mission and core values, our work extends far beyond hospital or clinic walls. We continually invest resources into our communities to meet the health needs of underserved and vulnerable community members, bringing them healing, comfort, and hope. Through our community benefit initiatives, we help to make our communities healthier places to live.

Our Core Values:

- Reverence - We honor the sacredness and dignity of every person.
- Commitment to Those Who are Poor - We stand with and serve those who are poor, especially those most vulnerable.
- Justice - We foster right relationships to promote the common good, including sustainability of Earth.
- Stewardship - We honor our heritage and hold ourselves accountable for the human, financial, and natural resources entrusted to our care.
- Integrity - We are faithful to who we say we are
- Safety - We embrace a culture that prevents harm and nurtures a healing, safe environment for all.

Our Hospital

Saint Mary's Hospital is a Catholic, not-for-profit, acute care, community teaching hospital that has served Greater Waterbury since 1909. In 2016, Saint Mary's Hospital became part of Trinity Health Of New England, an integrated health care delivery system that is a member of Trinity Health, Livonia, Michigan, one of the largest multi-institutional Catholic health care delivery systems in the nation serving communities in 26 states. Licensed for 347 beds, Saint Mary's is designated as a Level II Trauma Center, offers award-winning cardiac and stroke care and houses the region's only pediatric emergency care unit. As the leading provider of surgical services in Greater Waterbury, Saint Mary's was the first to introduce the daVinci® Robotic Surgery System. The hospital's satellites and affiliates extend from Waterbury to Wolcott, Cheshire, Naugatuck, Southbury, Prospect and Watertown.



Our Community

Saint Mary's service area and community refers to three primary geographic areas: (1) Waterbury/urban core; (2) the inner ring, which includes towns contiguous to Waterbury (Naugatuck, Prospect, Cheshire, Wolcott, Middlebury, Watertown, Thomaston); and (3) the outer ring, which includes all remaining towns in the region (Beacon Falls, Oxford, Southbury, Woodbury, Bethlehem, Morris, Litchfield, Goshen, Warren, Washington, Roxbury, Bridgewater, New Milford).

The community encompasses western Connecticut and is relatively large with about 313,000 residents. The geographic area was defined by primary service area (PSA) and secondary service area (SSA). The PSA is the area that the hospital predominantly serves and the hospital's main catchment area. It comprises all of Waterbury and has a population of approximately 114,400 residents. A snapshot of Waterbury from the 2020 US Census shows: 42,135 households; \$46,329 median household income; 47,800 total housing units; 16.1% with a bachelor's degree or higher; 28% Black/African American; 39% Hispanic or Latino descent; 11.2% two or more races; and 9.1% without healthcare coverage.

Our Approach to Health Equity

While community health needs assessments (CHNA) and Implementation Strategies are required by the IRS, Trinity Health ministries have historically conducted CHNAs and developed Implementation Strategies as a way to meaningfully engage our communities and plan our Community Health & Well-Being work. Community Health & Well-Being promotes optimal health for those who are experiencing poverty or other vulnerabilities in the communities we serve by connecting social and clinical care, addressing social needs, dismantling systemic racism, and reducing health inequities. Trinity Health has adopted the Robert Wood Johnson Foundation's definition of Health Equity - "Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care."

This implementation strategy was developed in partnership with community and will focus on specific populations and geographies most impacted by the needs being addressed. Racial equity principles were used throughout the development of this plan and will continue to be used during the implementation. The strategies implemented will mostly focus on policy, systems and environmental change as these systems changes are needed to dismantle racism and promote health and wellbeing for all members of the communities we serve.

Health Needs of the Community

The following provides a brief overview of the key findings from the 2022 Community Health Needs Assessment for the region. This includes findings relating to the top health priorities selected for additional community health improvement planning at a regional level. Each priority lists a subset of focus areas that are representative of issues most affecting the community of Greater Waterbury. These priority areas were established through a combination of community input and partner review of data and have been carefully examined to ensure inclusiveness of issues that contribute to health disparities in the community. Data in this report reflects a direct correlation to main priorities and focus area subsets.:

Access to Care

- Readmissions
- Language
- Care Coordination

Outreach & Community Trust

- Health Education
- Culturally Competent Care
- Black Maternal Health

Systems Change

- Substance Abuse
- Mental Health
- Chronic Disease Prevention

APRIL 2024 UPDATE:

In the Summer of 2023, the CBO (Community Business Organization), (BTS) Bridge to Success, surveyed approximately 1100 Waterbury residents for the purpose of determining the root cause(s) of the elevated feelings of depression and anxiety as reported by community members. The data, that was analyzed by Dillinger Research & Applied Data, determined it to be racism, poverty, and lack of work.

October 2023, the Collaboration Action Network (CAN) comprised of 18 community residents was created and to date has held 5 meetings. The TCI (Transforming Communities Initiative) CAN has embraced the approach BTS (Bridge to Success) had to community change and will make use of the building blocks of:

- Building capacity by providing direct support and connecting partners, trainers, and experts that provide technical assistance and access to broader networks to promote continuous improvement.
- Transforming power by recognizing the community's ability to actualize change and understand that systems transformation is only possible when communities, particularly Black and Latine are equipped with the tools and mindsets they need to be full participants in public life and, thus, have

- more control over their destinies; and
- Sustaining community by curating joyful and decolonized co-learning spaces that invite stakeholders to rebuild and sustain networks that work.

CAN members were also provided an opportunity to participate in several training opportunities offered by CT statewide organizations:

The Racial Equity Institute - The Groundwater Approach – “The Groundwater metaphor is designed to help persons internalize the reality that we live in a racially structured society, and that that is what causes racial inequity. The metaphor is based on three observations: racial inequity looks the same across systems; socio-economic difference does not explain racial inequity; and inequities are caused by systems, regardless of people’s culture or behavior.”

Health Equity Solutions (HES) Healthcare Equity Policy Academy – HES initiates and catalyzes policy programs and practices that advance health equity in Connecticut. Participants of the Academy gain greater understanding of factors that can impact one’s overall health and well-being. The training provides participants with the tools to better understand what health equity is, how it is reflected in Connecticut, and how they can support the movement towards a better system of health for all.

The March 2024 meeting was a pivotal turning point for the TCI CAN. The members were asked to narrow the contributors of anxiety and depression (racism, poverty, lack of work). The lack of affordable housing was presented as a cross-cutting issue based on previous CAN meeting discussions. The full CAN rejected the idea of narrowing their work to one issue and expressed their interest in creating 3-4 working groups to address each of the contributors, including housing. They asked for a survey of the CAN to be completed before the April 2024 meeting to assess members' interest in participating in topical workgroups. This strategy has the potential for significant community wide impact as it will allow the CAN as a group to advocate for policy change strategies across several interconnected issues and empower them to advocate for system changes. It is anticipated that during the month of April, the TCI CAN will articulate the outcomes and PSE strategies the group wants to coalesce around so that a community action plan and implementation strategy can be developed.

Due to this work, our Implementation Strategy for Saint Mary’s Hospital has been updated to reflect the actions thus far and to include community residents’ input.

Hospital Implementation Strategy

Significant health needs to be addressed

Saint Mary's Hospital, in collaboration with community partners, will focus on developing and/or supporting initiatives and measure their effectiveness to improve the following health needs:

1. **Outreach and Community Trust - Competent Care – CHNA pages 16, 20-24**
2. **Systems Change – Mental Health – CHNA pages 16, 17, 55, 56**

Significant health needs that will not be addressed

Saint Mary's Hospital acknowledges the wide range of priority health issues that emerged from the CHNA process and determined that it could effectively focus on only those health needs which are the most pressing, under- addressed and within its ability to influence. Saint Mary's Hospital does not intend to focus their Implementation Strategy on the following health needs:

- **Access to Care (Readmissions, Language, Care Coordination) – These needs are currently supported via our Diversity, Equity & Inclusion (DEI) department's focus on Race, Ethnicity & Language (REL) in guiding quality improvement efforts along with our preventable hospitalizations and social-care hub work. They will also be latently impacted through addressing culturally competent care.**
- **Outreach and Community Trust (Health Education, Black Maternal Health) - Saint Mary's is significantly involved in Health Education on a regular basis and has staff on the planning committee of the #Day43 campaign, an initiative to improve Black maternal health outcomes. However, this work will be reported upon in other documents.**
- **Systems Change (Substance Abuse, Chronic Disease Prevention) – These needs are resourced through existing collaboratives and partnerships in the City of Waterbury including internal and external behavioral health and medical health providers.**

This implementation strategy specifies community health needs that the hospital, in collaboration with community partners have determined to address. The hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During these three years, other organizations in the community may decide to address certain needs, indicating that the hospital then should refocus its limited resources to best serve the community.

1

Outreach and Community Trust - Culturally Competent Care



Hospital facility: Saint Mary's Hospital
CHNA reference pages: 16, 20-24

Brief description of need:

- Data shows clear evidence of continued health disparities based on race and ethnicity.
- Linguistic isolation is characterized as speaking English less than “very well.” People who struggle with English proficiency may have difficulty in school, seeking health care, accessing social services, or finding work in an English-speaking community.
- Inequities in access to healthcare, education, income, etc. lead to the health disparities that we observe in the data, especially when comparing outcomes based on race/ethnicity

Equitable and Inclusive SMART

Objective(s):

1. Build the capacity of 15 Saint Mary’s Hospital providers during the strategy period through awareness, education, and training in cultural humility/proficiency to improve the quality of care provided to Black, Indigenous, and people of color (BIPOC).
2. Through the work of the Transforming Communities Initiative (TCI), build a collaborative of city providers to address the structural racism that continues to impact health disparities for BIPOC communities and build capacity and trust.

2

Systems Change – Mental Health



Hospital facility: Saint Mary's Hospital
CHNA reference pages: 16,17, 46, 55,56

Brief description of need:

- Significant health disparities exist in Waterbury residents regarding mental health outcomes.
- 14% of Black residents and 21% of Latine residents reported experiencing anxiety.
- 20% of Black residents and 16% of Latine residents reported being “bothered” by depression.
- Mental Health is a complex issue that is a high priority for the CAN which has identified root cause issues such as Racism, Lack of Work and Poverty as drivers to these poor outcomes.

Equitable and Inclusive SMART

Objective(s):

1. Engage 15 youth impacted by mental health issues and develop a partnership with the TCI CAN, to align resources and implement a minimum of 3 actions over the Implementation Strategy timeline.
2. Advocate for 3 policy changes that will result in a shift in the root causes of Mental Health such as poverty, lack of work and racism.

Actions the hospital will take to build capacity, increase trust, and impact mental health outcomes.

Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Learn about the history, landscape, culture, and values of Waterbury BIPOC residents while incorporating the reasons for systemic barriers to accessing mental health care to improve patient experience	X	X	X	Saint Mary's Hospital	In-kind staff and resources
				Bridge to Success	In-kind staff and resources
				RIBA/Aspira	In-Kind staff and resources
				Focus location(s)	Focus Population(s)
Waterbury inner-city	BIPOC, priority zip codes 06702, 06704, 06705, 06706, 06708, 06710				
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Develop a multidisciplinary, cross sector collaborative for analysis of current systems in place which will lead to strategic development of policies and procedures that target improvement of BIPOC patient experience,	X	X	X	Saint Mary's Hospital	Portion of TCI Funding – up to \$350,000 total per year
				Bridge to Success	In-kind staff and resources
				RIBA/Aspira	In-kind staff and resources
				Waterbury Public Schools	In-kind staff and resources
				Waterbury Department of Health	In-kind staff and resources
				Focus location(s)	Focus Population(s)
Waterbury	Cross-sectoral organizations serving Waterbury residents in areas of education, healthcare, social services, etc.				
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Using an equity lens to identify internal and legislative policies that may be targeted for advocacy and change.	X	X	X	Saint Mary's Hospital	In-kind staff and resources
					In-kind staff and resources
				Focus location(s)	Focus Population(s)
Saint Mary's Hospital	Internal depts. THOfNE Gov't Relations				

Impact measures for these actions:

Impact Measures	Baseline	Target	Plan to evaluate the impact
Engagement of community members in discussions. (Building of Trust)	18 members engaged	Maintain level of engagement	Meeting participation data.
Increased resources dedicated to the need identified. (Increase Capacity)	TCI Budget Invested = \$147,000	Year 1 = \$147,000 Year 2 = \$350,000 Year 3 = \$350,000	Monitor budget allocations and resources brought to the initiative.
Resident input and participation in the process. (Community Engagement)	18 residents participating in the TCI CAN.	18 regularly engaged residents	Measure participation and survey for levels of engagement via evaluation plan for TCI.

Adoption of Implementation Strategy Update

On April 15, 2024 the authorized body of the Trinity Health Of New England Board reviewed the 2023-2025 Implementation Strategy for addressing the community health needs identified in the 2022 Community Health Needs Assessment. Upon review, the authorized body approved this Implementation Strategy and the related budget.

Syed Hussain, M.D.
Syed Hussain, M.D. (Apr 15, 2024 14:29 EDT)

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