



# Community Health Needs Assessment (CHNA) Implementation Strategy

Fiscal Years FY23-25



Mount Sinai  
Rehabilitation Hospital  
Trinity Health

**Mount Sinai Rehabilitation 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.** Mount Sinai Rehabilitation 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, 659 Tower Avenue, Hartford, CT 06112

## 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.
- Safety - We embrace a culture that prevents harm and nurtures a healing, safe environment for all.
- 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

## Our Hospital

Mount Sinai Rehabilitation Hospital, located on Blue Hills Avenue in Hartford's North End, is a licensed chronic disease hospital and certified by Medicare as an acute rehabilitation hospital and accredited by the Joint Commission, and the Commission on Accreditation of Rehabilitation Facilities for its General Rehabilitation and Stroke Specialty programs. Mount Sinai Rehabilitation Hospital, a 60-bed facility, is the largest provider of acute rehabilitation services in Connecticut. In 2015 Mount Sinai became part of Trinity Health Of New England, an integrated health care delivery system that is a member of Trinity Health based in Livonia, Michigan and one of the largest, multi-institutional Catholic health care delivery systems in the nation serving communities in 26 states.



Mount Sinai hosts a nationally recognized team of rehabilitation specialists, including physiatrists, physical therapists, occupational therapists, speech and language pathologists, orthopedists, otolaryngologists, urologists, neuropsychologists, neurologists, social workers, pharmacy experts and counselors - all under the same roof. The expansive facilities are exclusively dedicated to helping patients with advanced equipment and technologies that support best in class care.

Additionally, it is the home to The Joyce D. and Andrew J. Mandell Center for Comprehensive Multiple Sclerosis Care and Neuroscience Research, an outpatient program that brings together a full range of services for MS care that ensures a coordinated approach to helping patients maintain and improve their function.

## Our Community

The community of Greater Hartford is generally defined as the area served by the Capitol Region Council of Governments, which consists of 38 cities and towns along with the suburbs further out from the Hartford city center. The population for each of Greater Hartford's 38 cities, towns, and suburbs (with 2020 populations): Andover (3,151), Avon (18,932), Berlin (20,175), Bloomfield (21,535), Bolton (4,858,) Canton (10,124), Columbia (5,272), Coventry (12,235), East Granby (5,214), East Hartford (51,045), East Windsor (11,190), Ellington (16,426), Enfield (42,141), Farmington (26,712), Glastonbury (35,159), Granby (10,903), Hartford (121,054), Hebron (9,098), Manchester (59,713), Mansfield (25,892), Marlborough (6,133), New Britain (74,135), Newington (30,536), Plainville (17,525), Rocky Hill (20,845), Simsbury (24,517), Somers (10,255), South Windsor (26,918), Southington (43,501), Stafford (11,472), Suffield (15,752), Tolland (14,563), Vernon (30,215), West Hartford (64,083), Wethersfield (27,298), Willington (5,566), Windsor (29,492), Windsor Locks (12,613).

The diversity of Greater Hartford is relatively similar to statewide with 36% of the population being non-white. Both Greater Hartford and Connecticut have experienced an increase in diversity, especially among those under 18. • Among the region's foreign-born population, the most common countries of origin are Jamaica (in Hartford) and India (in most surrounding suburbs) • The population density of the city of Hartford is over seven times as dense as the population of the entire Greater Hartford region. • The majority of Greater Hartford's households are family households. However, the household makeup within the city of Hartford is different, with the majority of the households being non-family households. Between 2015 and 2021 the share of adults who agree that there are suitable employment options in Hartford has increased from 22% to 40%. However, this is still the second lowest rate for urban areas within the state. In 2021, 26% of Hartford residents had difficulty paying for food and 17% had difficulty paying for housing compared to 11% and 9%, respectively, statewide

## 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 as they relate to the key social indicators that were identified at a regional level. Each priority is representative of issues most effecting the community of Greater Hartford. These priorities were established through a combination of community input and partner review of data and have been carefully examined to insure inclusiveness of issues that contribute to health disparities in the community

Key Social Indicators found include:

- Family Economic Security
- Neighborhoods and the Environment
- Health Care Access and Affordability
- Health Status and Outcomes
- Community Trust and Civic Engagement

Along with these indicators, the following prioritized list shows the health concerns that arose during the development of the community health improvement plan in collaboration with our local partners.

An increased need for Access to Rehabilitation Healthcare Services

Barriers include:

- Navigation of health insurance & high-deductible plans
- Limited Continuity of Care
- Limited Supply of Neurology Services in the state
- Transportation Resources

Demand for Rehabilitation Services and Comprehensive MS services:

- High demand for rehabilitation services with aging population
- High rates of obesity increase demand for rehabilitation services
- MS populations have a need for specialized services

## Hospital Implementation Strategy

### Significant health needs to be addressed

Mount Sinai Rehabilitation 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. **High rates of Obesity -- CHNA pages 6,8,9,44-45,73**

### Significant health needs that will not be addressed

Mount Sinai Rehabilitation 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 Francis Hospital does not intend to address the following health needs:

**Access to Rehabilitation** - will not be directly addressed by Mount Sinai. Our Patient access/Financial assistance does however help to address insurance and plan access for our community members.

**Demand for Rehabilitation** - as it relates to high demand and specialized services will not be addressed by Mount Sinai. These issues have been worked on by a variety of community partners and Mount Sinai will continue with their collaboration to address these needs.

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This implementation strategy specifies community health needs that the hospital, in collaboration with community partners has determined to address. This implementation strategy outlines actions that will be taken in year one. An amended implementation strategy that defines actions for years two and three will be submitted after community workgroups have completed their root cause analysis and have provided suggestions for improvement to the hospital for consideration. 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

## High Rates of Obesity



**Hospital facility: Mount Sinai Rehabilitation Hospital**  
**CHNA reference pages: 6,8,9,44-45,73**

### Brief description of need:

Obesity: The health risk factor of obesity in adults for the City of Hartford is 34%. This factor is 7% higher than the adult average statewide in Connecticut of 27%.

### Equitable and Inclusive SMART Objective(s):

1. Increase nutrition knowledge by 15% consumption of healthy foods by 15% for 400 residents per year as measured by data collection at program enrollment.
2. Reduction and confidence in management of chronic conditions
3. Expand resources during the first year that are directed at this priority topic so that we can increase capacity of CBO's who are able to increase their engagement with Technical Assistance and other resources invested via our TCI project.
4. Increase participation of community members in the process so that 50% more residents are engaged in the implementation of our project plan during the 3- year duration of the project.

**Actions the hospital facility intends to take to address the High Rate of Obesity need:**

Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Ensure that that community is able to access community-based resource by partnering with CBOs and engaging to provide services including: Cooking Courses, Community Garden, Nutrition Education at the Food Pantry & food pharmacies	X			Mount Sinai Rehabilitation Hospital	\$140,000 grant funding
				SONE Health	
				Department of Health and Human Services	
				Levo International	
				<b>Focus location(s)</b>	<b>Focus Population(s)</b>
Hospital campus	High risk patients with unmanaged chronic conditions, community members, pantry clients				
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Outreach activities to increase volume of people reached	X			Mount Sinai Rehabilitation Hospital	In-kind staff and resources
				Joan C Dauber Food Pantry	
				Hartford Healthy Families Initiative	
				<b>Focus location(s)</b>	<b>Focus Population(s)</b>
North Hartford	Patients, community residents				
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Development of tools to measure outcomes.	X			Mount Sinai Rehabilitation Hospital	In-kind staff and resources
				<b>Focus location(s)</b>	<b>Focus Population(s)</b>

**Anticipated impact of these actions:**

Impact Measures	CHNA Baseline	Target	Plan to evaluate the impact
Obesity rate	34% of Hartford residents are obese which is 7% higher than state average 2022 Mt Sinai CHNA , pg. 73	Cohort at least 5% better than CHNA baseline	Collect data from survey to determine change in percentage of cohort population

## Adoption of Implementation Strategy

On February 14, 2023, 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.



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