

2009

Community Benefits Report



Hallmark Health

www.hallmarkhealth.org



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Hallmark Health System, Inc. is very pleased to submit our 2009 Community Benefits Report. This year our Community Benefit expenditures totaled \$4,853,543.000 in Community Benefit expenditures with \$2,275,262.00 going directly to Community Benefits and Services programs. This is an increase of over \$570,673.00 from 2008, despite decreases in state funding as a result of the economic downturn. This contribution emphasizes Hallmark Health's commitment to meeting the needs of the communities we serve and the continued dedication of our staff and leadership to this mission, despite the challenges of the current economy.

Hallmark Health System is proud of its accomplishments this year, being responsive to the communities we serve in north suburban Boston and providing state-of-the art medical care and services locally. Our employees, many of whom live in our service area, identify with the health needs of the individuals and families they serve as professionals, but also as fellow residents. They serve on boards of community service organizations, participate in civic events, and provide support to their communities whenever the need arises.

In 2009, in conjunction with our newly formed Community Benefits Advisory Council and approved by the Hallmark Health Board of Trustees, Hallmark Health updated its Community Benefits Mission statement to be a strong reflection of our commitment to the community. *"Hallmark Health System, Inc. is committed to building and sustaining a strong, vibrant, and healthy community. Hallmark Health dedicates appropriate resources to collaborations with community partners and the utilization of community member's input toward improving health services. Hallmark Health pledges to act as a resource and to work with the community during emergencies; improve access to care; identify, monitor, and address the unique health care needs within its core communities; and promote healthier lifestyles for residents through health education and prevention activities."*

Hallmark Health is devoted in continuing to strive to achieve excellence in the quality of healthcare we provide to all of our patients, in our hospitals, medical centers, and in community settings. We take seriously our obligation to identify and provide quality healthcare and services to community members that are unaware of their health status, unable to navigate the health system, or are more reticent about seeking traditional health services. We welcome the opportunity to promote the health and well being of all of our community members and to continue to identify and assist those residents that are unserved or underserved by our current health system.

A handwritten signature in blue ink that reads 'Michael V. Sack'.

Michael V. Sack, FACHE
President and Chief Executive Officer
Hallmark Health System, Inc.

**Hallmark Health System
Fiscal Year 2009**

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Organization Type: Health System

Member Hospitals:

- Hallmark Health System
 - Lawrence Memorial Hospital of Medford
 - Melrose-Wakefield Hospital

Community Health Network Areas:

CHNA 13 and 14: Greater Beverly/Gloucester CHNA and North Shore
CHNA
CHNA 15: North West Community Health Network Area
CHNA 16: North Suburban Health Alliance

Regional Center for Healthy Communities:

Northeast Center for Healthy Communities

Attachment 1

I. Background and Overview

Hallmark Health

Hallmark Health was founded in 1997 when a group of four community hospitals in Boston's northern suburbs came together to form a local, nonprofit health system. Today, Hallmark Health consists of Lawrence Memorial Hospital of Medford and Melrose-Wakefield Hospital in Melrose, the Cancer Center in Stoneham, Hallmark Health Medical Center in Reading, Malden Family Health Center, and an affiliation with an extended care facility. Hallmark Health also owns one of the state's busiest visiting nurse associations, including a palliative care and hospice program; community services including federal, state and foundation grant-funded programs; primary care physician practices throughout the region, one of only two hospital-based nursing schools in the state, and extensive outpatient services scattered throughout the service area.

The 2,679 employees at Hallmark Health are backed by a core medical staff of 400 experienced doctors – all working daily to meet the health needs of close to 600,000 residents in the 16 cities and towns served. Together, we treated more than 16,429 inpatients, provided 64,011 emergency visits, welcomed 1,178 newborns, cared for 21,018 surgical patients, and visited more than 4,000 home care patients in 2009. In 2009, Hallmark Health also provided a full range of procedures such as echocardiograms, Holter monitoring, EKGs, nuclear cardiology stress tests, cardiac catheterizations, angioplasties, pacemaker implantation, and other special procedures at the Cardiac & Endovascular Center at Melrose-Wakefield Hospital. This critical service offers patients a multidisciplinary approach to the diagnosis and treatment of cardiac and vascular disease and boasts some of the best “door to balloon” times in the area.

The Hallmark Health Medical Center in Reading offers a full complement of imaging, laboratory, and rehabilitation services. The Center also houses physicians who offer specialized care, including internal medicine, cardiology, obstetrics/gynecology and gastroenterology. The Hallmark

Health Cancer Center in Stoneham, offers the latest treatments for cancer care in a local setting.

In 2009, Hallmark Health continued to reach out into our communities, ensuring that families had the education, support and services they needed, at the times and locations best suited for them. At five community sites, nutrition education and resources for obtaining supplemental food were provided for more than 6,000 underserved residents through the North Suburban Women, Infants and Children (WIC) Nutrition Program. The Healthy Families program, which received 82 referrals and served 124 young families, provided home visits, education and support, resource and referral information, and topic-focused groups. The North Suburban Family Network provided support and education for more than 1,600 families of young children; and the Hallmark Health Baby Café, located in a community church, provided 1,200 visits directed toward assisting new Moms with breastfeeding and parenting support.

The Dutton Center for Adult Day Health program, with a capacity for 50 clients, cared for an average daily census of 45 frail elderly clients; providing a respite for their families by allowing them to continue with their jobs and activities, knowing their elder family member was in a safe and caring healthcare environment. The Senior Citizen's Health Center regularly provided a variety of health services such as blood pressure monitoring and health care counseling to the elderly at a variety of community locations, and other community members were screened and provided health information at local events.

Hallmark Health's Mission Statement

As the leading healthcare system serving the residents of Boston's North Suburban region, Hallmark Health strives to combine the latest medical technology and treatments with a personalized approach to care. We believe that the delivery of quality healthcare is only possible in an environment where patients come first; an environment that encourages patients and clinicians to work together to achieve the best possible outcomes. This is achieved through implementing on a daily basis the following mission, vision and values:

Hallmark Health System, Inc.

Our Mission

Our mission is to provide, in a community-based setting, the highest quality health care to the people of Boston's northern suburbs.

Our Vision

Hallmark Health will be the system of choice in our region with demonstrated service to and support from area residents and physicians.

Our Values

Collaboration-Working together as a team and actively communicating with each other, our patients, and our communities.

Attentiveness-Always remembering that we are here to serve the needs of the patients.

Respect-Treating others (including patients, families, co-workers, and physicians) with dignity and courtesy while striving to understand their needs.

Excellence-Holding ourselves to the highest standards of quality, service, integrity, and performance.

Stewardship-Managing resources prudently to ensure our future ability to serve our mission.

Hallmark Health's Community Benefits Mission Statement

Hallmark Health System, Inc. is committed to building and sustaining a strong, vibrant, and healthy community. Hallmark Health dedicates appropriate resources to collaborations with community partners and the utilization of community member's input toward improving health services. Hallmark Health pledges to act as a resource and to work with the community during emergencies; improve access to care; identify, monitor, and address the unique health care needs within its core communities; and promote healthier lifestyles for residents through health education and prevention activities.

Community Benefits and Community Services have been key components of the Hallmark Health Mission since its inception in 1997. Hallmark Health has always sought ways to support these activities through identifying and securing grant funding, through fundraising efforts, and through direct financial support. Although challenging due to the size of its geographic scope of 16 cities and towns, Hallmark Health makes a concerted effort to be both a good citizen and a good neighbor, especially through its Community Benefits programs. During 2009, with State and local social program cutbacks, Hallmark Health has continued its commitment to the community by providing a wide array of health improvement programs. The organization will continue to commit its resources to community programming that supports its charitable mission, in the years to come.

Civic involvement is part of the culture at Hallmark Health at all levels of the organization. Staff are engaged in numerous charitable and community volunteer efforts both individually and through the Hallmark Health Community Teams. The Leadership staff of Hallmark Health contributed more than 600 hours in 2009 as active members in over 40 civic groups, community organizations, boards, and projects throughout the North Suburban Region. The Lawrence Memorial Hospital Regis College faculty also donated their time to support health promotion and prevention efforts in the community and in efforts overseas to provide professional development to nurses in Haiti. This year, the school was chosen, by the Sawiris Foundation for Social Development in Egypt to partner with the organization over the next five years to establish the Gouna Nursing Institute, a two-year nursing program in Egypt that will emulate the Medford-based school's curriculum.

A large number of Hallmark Health employees also donate their time as volunteers in the community. In 2009, employee volunteers donated more than 1,700 hours. Examples of staff efforts included new books donated to the Hallmark Health Healthy Families *Holiday Book Drive*, care packages to U.S. troops, toys to children in need during the holidays, food drives for local food pantries, a successful back-to-school drive to supply backpacks and school supplies for children in Medford, and participation in various fundraising walks and events to assist many health-and social service causes.

This year in response to the devastating local economy, two of Hallmark Health's Community Teams provided monthly support to congregate meals sites in their towns, providing families and elders the opportunity for a hot meal and socialization. A program for seniors "Senior Suppers" was also

instituted. Monthly, a low cost meal, health education, blood pressure screening, and often entertainment was provided in the hospital's cafeterias for local elders. Hallmark Health leaders, physicians, and employees volunteered their time to serve the meals, provide the education, and socialize with the elder residents. In 2010, Hallmark plans to offer a similar program for families with children to provide them with the opportunity for a low-cost nutritious family meal, health education, and socialization in their community. The Medford Family Network is collaborating with Hallmark Health on this program.

In addition, a wide variety of individuals in the community have shown their commitment to Hallmark Health through volunteerism. In 2009, volunteers provided countless hours of service through Melrose-Wakefield and the Lawrence Memorial Volunteer Departments. Volunteers support patients and the hospital staff, but in this challenging economy, many of the volunteers have found their volunteer positions a way to stay connected and network while they are out of the work force and seeking employment- a win-win for everyone.

Hallmark Health's Leadership and the Board of Trustees are actively involved in overseeing the purpose and activities of the hospital system including exercising authority over Community Services and Benefits activities. In 2009, Hallmark Health formalized the Community Benefit process that began in 1997, the year that Hallmark Health was first founded. Through its regular board meetings, internal hospital meetings and leadership activities, Hallmark Health is actively involved in shaping the Community Benefits planned and provided by the system. For 2009 the System Vice President for Home Care and Community Services, under the direction of the President and Chief Executive Officer, supervised the Director of Community Services. The Director managed the daily activities of the Community Services Department and drafted and implemented the Community Benefit Plan for the 2009 fiscal year. The Community Benefits Advisory Council was expanded in 2009 and met quarterly. This group reviewed and approved the 2009 Community Benefit plan and ensured that the 2010 Community Benefits Plan was drafted and approved by the Hallmark Health Board of Trustees prior to October 1, 2009. The Community Benefits Mission Statement was also revised and approved by the hospital's Board of Trustees in September of 2009.

II. Internal Oversight and Management of Community Benefits Program

The Director of the Department of Community Services reports to the System Vice President of Home Care and Community Services, who in turn reports directly to the President and Chief Executive Officer of Hallmark Health System. The Department of Community Services works closely with staff, managers and directors of both clinical, and non-clinical service areas within the system and its subsidiaries. The Director of Community Services takes a lead role in establishing and strengthening relationships with community organizations. In addition, Community Services staff members are represented on Hallmark Health Community Outreach teams as well as external boards and coalitions including Healthy Malden Inc., which suspended operations in December 2009; Medford Health Matters; the Joint Committee for Children's Health Care in Everett; the Melrose Alliance Against Violence (MAAV); the Stoneham Alliance Against Violence (SAAV); the Wakefield Alliance Against Violence (WAAV); CHNA 13/14; CHNA 15; CHNA 16; and many others.

The Director of Community Services oversees the reporting of Community Benefits information; compiling Community Benefits data and writing the annual report. In addition she oversees three major community benefits programs administered by Hallmark Health and housed within the Department: the North Suburban Women, Infants and Children (WIC) Nutrition Program, the North Suburban Family Network, and the Community Health Education Department. In her role as supervisor, she is responsible for budget oversight and quality assurance for those programs.

Within the Hallmark Health System, there are numerous ways that information is shared with employees about community benefits and community service programs. Specific news of community service activities and events hosted throughout the year, including fundraising and volunteer collections of items and food, are visibly highlighted in two system-wide publications, the *Physician Focus* and *The Pulse*, as well as posted on the Hallmark Health website at www.hallmarkhealth.org. The Community Outreach Teams meet to provide updates on community activities sponsored by Hallmark Health. Announcements and events of these teams and other staff involved in community benefits work is routinely posted on Hallmark Health's Meditech system (internal email), which reaches all employees, and

on Outlook mail, which is available to most employees and all of the leadership team.

In fiscal 2009, a Community Benefits web page was developed to ensure transparency of the hospital's Community Benefits programs and processes to the community. An on-line Community Health Assessment survey is available to allow community residents to submit their feedback. In 2010, the survey will be translated into the five most common languages (including English) spoken in this area. Also in 2010, the health system's community publication, *Perspectives* has returned to highlight important programs in the community. Residents can visit Hallmark Health's Community Benefits web page at <http://www.hallmarkhealth.org/community-benefits.html>.

To ensure internal coordination of the community services provided by Hallmark Health, the Director of Community Services meets regularly with the senior managers of other community-focused Hallmark Health programs, such as the Hallmark Health Visiting Nurse Association and Hospice. During those meetings, information is shared and areas for collaboration are explored. The Director, Community Services Outreach Coordinator, and Community Outreach Specialist are also members of many of the Hallmark Health internal committees such as the Diversity Steering Committee, the Women's Health Coalition, the "Baby Friendly Hospital" Task Force, the North Suburban Family Network Coalition, and the Healthy Families Coalition, to name a few.

III. Community Health Needs Assessment

Hallmark Health has used a variety of ways in which to identify the health care needs, especially the needs of un-served and underserved populations within its geographic communities. The following groups have provided input into determining the disadvantaged populations within our communities:

- o The Community Benefits Advisory Council
- o Community Outreach Teams. Currently there are six Community Outreach Teams covering Malden, Medford, Melrose, Reading, Stoneham and Wakefield.
- o The Community Patient/Family Advisory Councils of Lawrence Memorial Hospital and Melrose-Wakefield hospitals.
- o Local community coalitions such as Medford Health Matters, Healthy Malden, Inc., the Joint Committee for Children's Health Care in

Everett, the Melrose Alliance Against Violence, the Wakefield Alliance Against Violence, the Stoneham Alliance Against Violence, the Hunger Network and others.

- o The Community Health Network Areas (CHNAs) covering the expansive Hallmark Health service area including CHNA 13/14, CHNA 15 and CHNA 16.

In addition public health and other relevant data has been reviewed to identify health disparities within the core Hallmark Health communities.

Community Benefits Advisory Council

In the current year, Hallmark Health convened the Community Benefits Advisory Council comprised of the System Vice President of Home Care and Community Services; the system's Controller; the General Counsel and Chief Compliance Officer; the System Vice President for Fund Development; the System Director of Public Affairs and Marketing, two community representatives, a member of the hospital's Board of Trustees, and the Director of Community Services. This body acts as the planning committee for Hallmark Health's Community Benefits Plan by defining the process for recognizing the current and emerging health needs in the community and developing the Community Benefits Plan to respond to these identified needs. This process includes defining measurable outputs and outcomes for the Community Benefit programs and formalizing the plan through approval by the hospitals' Board of Trustees.

The group plans to solicit input regarding community health needs from current state and other reputable data, the Hallmark Health Community Teams, Community Coalitions, the LMH and MWH Community Patient/Family Advisory Councils, and the CHNAs. In 2010, Hallmark Health has contracted with the Northeast Center for Healthy Communities to facilitate focus groups comprised of key community leaders, members of the community benefits target populations, and community residents that have not traditionally come to Hallmark Health for medical care. The information collected will flow through the System Vice President of Home Care and Community Services and the Director of Community Services, who are members of these groups or have staff members assigned to represent the hospitals as members. The System Vice President for Home Care and Community Services will act as the liaison to the Hallmark Health full Board of Trustees and the Controller, General Counsel and Chief Compliance Officer, and the System Vice President for Fund Development will also provide additional support at the highest levels of the organization.

Public Health Data

To better examine the health status of our populations and to determine unmet needs in Hallmark Health's core communities, the Director of Community Service compiled data from MassCHIP, Healthy People 2010, the American Heart Association, the Susan G. Komen Foundation, and the American Cancer Society. Program data from the Hallmark Health Interpreter Services Program, Hallmark Health's 2008 Inpatient data, Hallmark Health North Suburban Women, Infants and Children (WIC) Nutrition program, and Healthy Families, US Census Bureau Report: Selected Social Characteristics in the United States 2005-2007 American Community Survey, US Census State and County QuickFacts 2000, Massachusetts Department of Public Health Report: First Language is not English (FLNE) and Limited English Proficiency (LEP) Students in Massachusetts Public School 2005-2006 School Year, Massachusetts Department of Public Health Report: Refugee and Immigrant Health Program Refugee Arrivals by Country of Origin 2006-2010, and Massachusetts School and District Profiles, 2008-09 Enrollment By Race/Gender Report was also reviewed. Anecdotal information was collected from some of Hallmark Health's community partners such as the Joint Committee for Children's Health Care in Everett and Healthy Malden, Inc. and from Hallmark Health Community Team representatives.

Socioeconomic Data

In the core communities of Hallmark Health, which includes Everett, Malden, Medford, Melrose, North Reading, Reading, Saugus, Stoneham, and Wakefield, four of the communities- Everett, Malden, Medford, and Saugus have per capita income levels below the state average. In Everett the poverty rate is at 11.8% and the unemployment rate is also higher than the state average. Malden's per capita income is 15% below the state average, yet the poverty level and unemployment level are similar to the state average indicating a higher percent of the population are the "working poor". Medford's per capita income is slightly below the state average and unemployment is slightly better than the rest of the state. Nineteen percent (19%) of the community is at 200% of poverty level or below.

The Diversity of the nine communities is also very different. Both Everett and Malden have populations comprised of a higher rate of Black persons (7.9% in Everett and 10.1% in Malden) than the rest of the state and in Malden, the percentage of Asian residents is 19%, also higher than the state average. In Everett the Hispanic population is higher than the state average

at 11%. In Medford the percent of Black residents is two percent higher than other communities while the Asian population is slightly higher than the rest of the state. The communities of Melrose, North Reading, Reading, Saugus, Stoneham and Wakefield have primarily White populations with smaller Asian, Hispanic, and Black populations. In addition to their racial mix, the communities of Everett, Malden and Medford are home to families with origins as diverse as Italy, Turkey, Cameroon, Brazil, China, Haiti and too many others to mention. A variety of different languages are spoken and many different religions and cultures are practiced. In all of the communities except North Reading, the percent of residents' age 65 and older is greater than the state average.

Maternal Child Health Data

In both Malden and Everett health status indicators for maternal and child health showed some areas of concern. The infant mortality rate and low birth weight rate are higher than the state average in both Everett and Malden. In North Reading and Stoneham, the infant low birth weight rate was also higher than the state average. In Malden, the infant mortality rate is nearly double the state average. The percentage of women receiving adequate prenatal care is slightly better than the state average in both Malden and Everett, however, the number of women not receiving prenatal care during the 1st trimester was much higher (25.0%) than the state average (17.9%) in Everett. In Medford too, the number of women not receiving prenatal care during the 1st trimester is slightly higher than the state average. Almost double the women in Everett (64.7%) receive prenatal care financed by public funds than the state average (34.2%). Similar to Everett, a greater percentage of women in Malden (9.5%) also receive prenatal care financed by public funds. According to statistics from Healthy People 2010, Malden is one of only five Massachusetts communities that reported gestational diabetes rates above the state average of 3.8%. Malden's rate of gestational diabetes is 5.5%, the second highest in the State. The percentage of adolescent pregnancies is half of the state average in Malden and less than the state average in Everett and the other six communities; however both Hispanic and Black teen birth rates are higher than the state average in the Northeast region and the numbers are trending upward.

Infectious Disease Data

In Everett the rates for Hepatitis B and Syphilis are more than twice the state average- (but the numbers are very small which could be a factor). Chlamydia rates are also higher than the state average. In Malden the rate for newly diagnosed AIDs cases is higher than the state average and the rate

for tuberculosis is five times higher than the average rate for other communities in the state. Rates for Hepatitis B and Syphilis are more than twice the state average. In Medford the rate for Hepatitis B is twice the state average. Melrose, Saugus, Stoneham and Wakefield all have higher rates of pertussis than the state average and Reading demonstrates positive indicators in the area of infectious disease except for pertussis and hospital discharges for bacterial pneumonia.

Cancer Data

In Everett breast and lung cancer mortality rates are higher than the state average. In Malden breast cancer mortality rates are lower than the state average while hospitalization and incidence rates are about equal to the state average except for women ages 75-84 (much higher). For lung cancer, Malden White men had 35 % higher mortality rate compared to the state average while Asian men and women had three times the lung cancer mortality rate. In Saugus, the deaths from lung cancer are higher than the state average. In Medford the total deaths from cancer are slightly lower than the rest of the state but deaths from lung cancer and breast cancer are both slightly higher than the rest of MA. While Medford has similar rates of breast cancer mortality as the rest of the state, the rate doubles other communities for women ages 45-64. The overall rate of breast cancer incidence for Medford is 24% higher than other communities in the state. The rate of total deaths due to colon cancer is also lower in Medford than the rest of the state, yet the incidence in adults ages 45-64 was higher than the state. In addition, the rate for Black men was 14% higher and the rate for Asian men and women was five times higher. Melrose has a 10% higher incidence of breast cancer for women particularly in women ages 45-64 and 65-74. In North Reading, overall cancer deaths are higher than the State average especially for lung cancer. In Stoneham, overall cancer deaths are higher than the State average especially for lung cancer. Finally Wakefield has a breast cancer mortality rate two times as high as other communities yet the total incidence rate of breast cancer is slightly below the state average. The rate of mortality for lung cancer remains far below the state average except for Asian men where it is double.

Cardiovascular Disease Data

In Everett mortality rates for cardiovascular disease are on par with state averages. In Malden, White and Asian men and Black women have a much higher mortality rate from coronary heart disease and heart attack than the state average. Black women have a rate three times the state average for mortality due to heart attack while for Hispanic men it was two times and

Asian men it was six times the state average. In Saugus the overall deaths attributed to cardiovascular disease are higher than the state average. Medford reports rates of death due to cardiovascular disease lower than the state average except for men, who had a higher rate of death due to heart attack, especially Black men (almost double). Asian men have a mortality rate from coronary heart disease three times the state average and a heart attack mortality rate ten times the state average. Both men and women in Malden have lower rates of stroke as compared to the rest of the state except for men ages 55-74 for whom it was double the state average.

For Melrose, the community's rate of hospital discharges for most illnesses is below the state average, with the exception of the rate for angina, which was more than twice the state average. The indicators for cardiovascular health show that while the rates for mortality due to coronary heart disease and heart attack are only slightly higher than the state average, the mortality rate for stroke for women is higher than the state average. Also Melrose has a higher rate of hospitalization for both men and women for stroke and coronary heart disease. In North Reading deaths from cardiovascular disease rate higher than the State average. In Reading deaths from cardiovascular disease are on par with the State average. Wakefield's rate for deaths due to coronary heart disease and stroke for men and women was lower than the state average. However, the rate of death due to heart attack for men was much higher than the state average and slightly higher for women.

Diabetes Data

Diabetes mortality for Malden is ½ the rate for other communities but rates of hospitalization for diabetes is consistently higher except for Blacks. For Blacks, the hospitalization rate is particularly higher in the ages of 25-44 and 65-74.

Diabetes mortality for Medford is overall 5 % lower than the rest of the state except for females (slightly higher) and people ages 45-64 (twice the state average). The diabetes related hospitalizations for Medford are higher than the state especially for males, people 25-44 and 75 years and older. Obesity rates for all ethnic groups are either at or above the state average.

Discharge Data

In Malden discharge data shows that asthma, angina and bacterial pneumonia discharges are all much higher than state averages. In Medford hospital discharges for asthma, bacterial pneumonia and angina are slightly

higher compared to the rest of the state. In Stoneham and North Reading the hospital discharge from asthma is higher than the State average. In Saugus rates are higher for asthma and angina.

Additional Pertinent Health Data

In addition to what has been previously reported the following statistics were noted:

- In Everett, Malden and Medford the rate of injection drug user admissions to DPH funded programs is higher than the rest of the state, as is the rate of alcohol and other drug-related hospital discharges. For Wakefield, substance abuse admissions to DPH-funded treatment programs and admissions for IV drug use are on par with the rest of the state, and alcohol and other drug- related hospital discharges rated almost much higher than the state average.
- In Reading both motor vehicle-related injury deaths (13% which is 5.6% higher) and suicide (8.6% which is 1.8% higher) are higher than the state average.
- In Saugus suicides and homicides are higher than the state averages- this may be a factor of a relatively small sample size.
- Wakefield's motor vehicle death rate is (1.2%) higher than the state average. In Wakefield the homicide rate was also troubling and higher than the State average (though the actual number was low at 2 deaths due to homicide).
- MA State health statistics also show a recent rise in domestic violence, elder abuse and osteoporosis rates.
- Behavioral health visits for severely ill patients to the Melrose-Wakefield Hospital Emergency Department, serving all of these communities, has more than doubled during the past five years. These patients provide challenges to the resources of the Emergency Departments, often requiring the skills of a variety of disciplines for safe, effective, and empathetic care.

IV. Community Participation

As stated in the prior section of this report defining the process of the Community Needs Assessment, Hallmark Health is participating with the community in an ongoing way through our Community Outreach Teams, as members of community coalitions and the areas CHNAs. These methods have proved to be an effective way to reach out into the community to gather information about emerging health care needs and provide support to local broad-based health initiatives such as flu clinics and blood drives. In a more

formal way, the hospital's Patient/Family Community Advisory Councils bring community members into the hospital setting to address issues such as access to care, cultural diversity, and improving services to patients, especially those that feel less comfortable in the traditional health care setting.

Through Hallmark Health's extensive community partnerships, a few key community members representing Community Benefits target populations were identified and invited to sit on the Community Benefits Advisory Council for the year. This Council achieves its effectiveness through an active and open dialogue in which concerns and feedback are shared, and where community members feel welcome to actively participate in the many aspects of Community Benefit program development. Each year, the role of the community representatives will be reviewed to ensure that the members continue to characterize the target populations identified in the Community Benefit Plan. Some ways that community members currently provide input include:

Community Outreach Teams: One of the primary reasons that Hallmark Health initiated Community Outreach Teams more than seven years ago was to ensure that Hallmark Health obtains information directly from community members on how to better serve their needs. The Teams had sponsored events ranging from informal (recreation, sporting events) to formal, (community health fairs) thereby promoting multiple opportunities to interact with a wide range of community members in ways that build a trusting relationship, key to truly listening to the voice of individual community members. As Hallmark Health moves forward in its Community Benefits planning process, it will continue to utilize the collective knowledge of the Teams. To this aim, the Teams' Organizing Charter was rewritten in 2008 to help guide the membership toward more formalized Community Services/Community Benefits activities. In 2009, the Director of Community Services met with the Team captains to discuss the changes in the way Community Benefits will be measured going forward and provided them with relevant data for their communities. The Teams are committed to their communities and their teammates, and are excited about the opportunity to support the Community Benefit program of Hallmark Health in new and different ways. In 2009 many of the Teams refocused their efforts to provide support for the target populations identified in the Hallmark Health 2009 Community Benefits Plan.

Currently, there are six community outreach teams named for Malden, Medford, Melrose, Wakefield, Reading and Stoneham. By tailoring outreach and programs based on what individual communities value most, Hallmark Health is the organization that local communities look to when they face a health-related challenge or need. The Teams continuously solicit input from key community leaders as well including superintendents of schools, state representatives, business leaders, fire and police personnel and local health departments. Many of the employees at Hallmark Health, who serve on the Teams, also participate in a number of other community groups and civic organizations. As a result, these employees are actively engaged in a number of ongoing discussions providing them with information regarding emerging community needs. The team efforts have also acknowledged Hallmark Health in recognition from four area Chambers of Commerce, other civic organizations, the House of Representatives, the American Hospital Association, and the Massachusetts Hospital Association.

Employee volunteers staff the Community Teams. More than 100 employees, volunteers, and physicians were involved in a team or a team-sponsored event in 2009. In 2009 the team members logged more than 1,800 hours toward team events and as active members in over 20 civic groups in the region. Following are a few of the Team highlights for 2009:

Team Malden:

- Helped to sponsor the Malden Rotary Road Race in March.
- Staffed a table for Malden Healthy Kids Day focused on Bicycle Helmet Safety.

Team Medford:

- Participated in the Medford Senior Health Fair.
- Provided support to the Medford Public Schools through offering health education programs on topics such as nutrition.

Team Melrose:

- Provided monthly support to both the Community and Senior Dining Programs in Melrose. These are weekly congregate meals offered by the city of Melrose for low-income families and elders.
- Provided support to the seasonal and H1N1 Flu Clinics in Melrose.

Team Reading:

- Supported the Reading Senior Health Fair.

- Offered a “Back School” at the Reading Medical Center for area residents.

Team Stoneham

- Held blood pressure clinics on alternate Tuesday evenings at the First Congregational Church in Stoneham.
- Provided Blood Pressure and Body Mass Index Screening for town residents at Stoneham Town Day.

Team Wakefield

- Supported the Wakefield Alliance Against Violence through membership and active participation in events and activities.
- Provide a variety of health screenings at Wakefield Festival By the Lake.

Community Advisory Councils:

The Community Patient/Family Advisory Council of Lawrence Memorial Hospital (LMH): In 2009 Hallmark Health continued to strengthen its relationships in the community by sponsoring the Community Advisory Council for Lawrence Memorial Hospital. The group is comprised of six community members, a retired hospital trustee who is also a Medford resident, the Director of Medford Health Matters Community Coalition, a Lawrence Memorial Hospital physician, and representatives from Hallmark Health’s Marketing Department, Nursing Department, and the Site Administrator for the hospital. Citizen members of the Council are from the neighborhoods of Medford: West Medford where many of the citizens are African-American or of Haitian decent, South Medford where many of the residents are of Irish, Italian and Brazilian heritage, and in the Tufts University neighborhood where college students from around the world live and attend school. The Council was formed to obtain feedback and ideas from community members on how the hospital can be more receptive to the unique needs of community residents, especially those of diverse backgrounds, and to promote the highest quality of patient-centered services by fostering a strong partnership through outreach activities with Medford community residents. In response to a request, the Council, is planning an extensive health fair in the spring of 2010 to offer screening and health education in the South Medford neighborhood

The Community Advisory Council of Melrose Wakefield Hospital (MWH): Following in the footsteps of the LMH Community Advisory Council, in 2008 Hallmark Health convened the Community Advisory Council of the Melrose-Wakefield Hospital. This Council is comprised of five community

members of diverse ages and backgrounds, a representative from physician services, and leadership from the hospital. Some of the community members are former patients such as a young woman who delivered her babies at the hospital and a retired schoolteacher who wanted to help her local hospital where she receives her health care. While newly established, the group is working to develop by-laws and discussing how to expand their membership. In the coming year, the Council will assist Hallmark Health to strengthen collaborations around meeting the divergent health needs for MWH and to provide input into the planning of future Community activities and initiatives. In October of 2009, in response to a request of a Council member, the North Suburban Family Network collaborated with *Luna Moms*, a group committed to improving the environment for children, and *Whole Foods* to offer a community education program “Making Your Home Healthier”. The program included sessions on the benefits of organic foods, information about plastics and the implication on food safety, and helpful ideas on how to “green” your home environment for better health. More than forty community residents were in attendance.

Community Coalitions:

As part of its efforts to improve the health status of its core communities, Hallmark Health participates in a variety of broad-based community coalitions and initiatives that work towards addressing the specific and general health needs in these cities and towns. A sample of current membership include: Malden High School Teen Parent Task Force, the Everett Community Partnership and Lead Prevention Committee, Mystic Valley Elder Services Provider Task Force, Malden Council on Aging, Medford Council on Aging, Melrose Council on Aging, Saugus Council on Aging, Lynnfield Council on Aging, Healthy Families Community Coalitions, Medford Family Resource Coalition, the Melrose Substance Abuse Prevention Coalition, and the Malden, Everett, and Medford Family Networks. A few key coalitions are highlighted.

The Joint Committee for Children’s Healthcare in Everett

The mission of the Joint Committee for Children’s Health Care in Everett (JCCHCE) is to ensure that all children and families in Everett and surrounding communities have access to quality, affordable health care. The JCCHCE is a not-for-profit organization comprised of educators, health care professionals, hospital and school administrators, parents, grandparents, civic and government leaders, and members of civic and community organizations, who volunteer their time, talents, and resources. Hallmark Health provides support through extensive staff participation in the

JCCHCE. The JCCHCE provides family outreach through the Parent Liaison and volunteers who work to connect families with appropriate health insurance, health care, and community resources. Additionally, the JCCHCE works collaboratively to provide health education, community service programs, and other public health initiatives to community members.

In 2009 the committee helped Hallmark Health to plan and host a session of *HeartSense for Women*, a program funded by the Rite Aid Foundation to raise awareness of women's cardiac risk factors. Hallmark Health was also invited to work collaboratively with the JCCHCE and Cambridge Health Alliance to discuss the unique health issues of new immigrants to the community.

Healthy Malden, Inc.

Healthy Malden, Inc. is a unique public/private community-based coalition founded in 1993 by Hallmark Health and the Mayor's Office of the City of Malden. The mission of Healthy Malden, Inc. is to improve the health of Malden residents by fostering citizen and agency collaboration aimed at the community's priority health and social issues. The Healthy Malden coalition consists of more than 250 volunteers from all sectors of the community committed to working together to promote programs that will lead to improving the quality of life for all Malden residents. The work of Healthy Malden, Inc. is accomplished through eight topic-specific task forces that develop ongoing programs with wide representation from community leaders from a diverse cross-section of the population. These leaders include Hallmark Health employees at the board and task force levels, representatives from the school system, law enforcement, the District Attorney's Office, the Mayor's Office, the Department of Social Services, the faith community, parent and family services, and multicultural organizations. In December of 2009, despite best efforts of the staff and the Board of Directors, Healthy Malden, Inc. suspended operations due to fiscal constraints. The agency's Board of Directors is hopeful that when the economy improves, the coalition's operations will be reinstated.

Medford Health Matters

Medford Health Matters (MHM) was formed in 1995 to identify and explore health issues of concern to Medford residents, and to promote programs that lead to positive changes in the quality of life for all community members. A multi-disciplinary group of community members, MHM consists of a diverse array of leaders from a number of human and social service organizations including the Greater Medford VNA, the Public Health

Commission, Mystic Valley Elder Services, Medford Public Schools and Hallmark Health's Department of Community Services, among others. One of the major focuses of the organization is its work with substance abuse prevention.

Portal to Hope

Located at the Lawrence Memorial Hospital campus in Medford, *Portal To Hope*, a nationally recognized non-profit organization, provides comprehensive services to people whose lives have been impacted by domestic violence, sexual assault and stalking crimes. *Portal to Hope* through its partnership with Hallmark Health provides victims of domestic violence with the opportunity to access support counseling and other direct care. Due to budget constrains, *Portal to Hope* has also been compelled to decrease their activities in 2009.

Melrose Alliance Against Violence (MAAV) Formed in 1995, the Melrose Alliance Against Violence (MAAV) is a non-profit, community-based organization that focuses on outreach, education and community collaboration in order to raise awareness of the problems of violence in Melrose. Working closely with the Melrose Police Department the Board of Directors includes representatives from the police, schools, clergy, Melrose-Wakefield Hospital, business community, the health department, students, and community members at large.

Stoneham Alliance Against Violence (SAAV) Formed in 2007, the Stoneham Alliance Against Violence is a non-profit, community-based organization modeled after the Melrose Alliance Against Violence that also focuses on outreach, education and community collaboration to raise community awareness about issues of domestic violence. Members of Hallmark Health staff provide support for this coalition. In recent months, one of Hallmark Health's Community Educators has been appointed as the Domestic Violence Liaison to the Stoneham Police Force. She has been collaborating with the Emergency Departments at Hallmark Health to enhance the services offered to victims of sexual assault.

Wakefield Alliance Against Violence (WAAV) A staff member of Hallmark Health, the manager of Hallmark Health laboratory services, was instrumental in bringing community members together to form a coalition that then recruited a board of directors and later assisted WAAV in becoming a 501c3 non-profit community organization. Hallmark Health also

led efforts to obtain funding for WAAV including a \$10,000 state grant and funding from the Wakefield Rotary.

The Tri-City Hunger Network

For the past two years, the Community Services Department has represented Hallmark Health at the Tri-City Hunger Network meetings. The Network members are comprised of Project Bread, the Bread of Life, Boston Food Bank, Tri-City Community Action Program, Inc., the Massachusetts Department of Children and Families (DCF), and faith-based organizations in the local area that provide a community soup kitchen or offer a food pantry. This group provides Hallmark Health with the opportunity to network with many of the areas' front-line community service providers that specialize in serving the underserved members of the community, especially the local Haitian community. During the holiday season, Hallmark Health works closely with this organization to ensure food and gift donations are distributed to local families in need.

Support for local Substance Abuse Prevention Coalitions

In Medford, Melrose, and Reading hospital leaders and employees provide countless hours in support of the Substance Abuse Prevention coalitions. In Medford, the Community Services Department is a key member of the task force through Medford Health Matters. In Melrose a leader from the inpatient Psychiatric Department and Community Services employees share the responsibilities of membership on the coalition. In Reading, a Hallmark Health pharmacist represents the hospital on the coalition. In 2010, the Hallmark Health leaders will work together to discuss strategies to support the cross-pollination of ideas and efforts across these communities.

Service Organization Representation

As part of its efforts to address the needs of its core communities, Hallmark Health partners with local businesses through service organizations in Everett, Malden, Medford, Melrose, Wakefield, and Stoneham. In 2009 Hallmark Health staff were members of 40 service organizations such as local Rotary Clubs, Chambers of Commerce, Kiwanis and Lions clubs. These organizations provide charitable support to local communities through financial and volunteer efforts.

Community Health Network Areas

Representatives from Hallmark Health System and Hallmark Health Visiting Nurse Association and Hospice are active participants in the local Community Health Network Areas (CHNA), which coordinate public health

delivery within their territories. Due to the size of the Hallmark Health geographic area of 16 cities and towns, our employees sit on three CHNAs: the North Suburban Health Alliance (CHNA 16) which includes the communities of Everett, Malden, Medford, Melrose, North Reading, Reading, Stoneham and Wakefield and where we are most active; the North West Suburban Health Alliance (CHNA 15) which includes the towns of Acton, Bedford, Boxborough, Carlisle, Concord, Lexington, Lincoln, Littleton, Wilmington, Winchester and Woburn which is the primary service area for four of our WIC communities; and (CHNA 13/14) the Greater Beverly/Gloucester Community Health Network and North Shore Community Health Network. In CHNA 13/14 we serve citizens from Saugus and Lynnfield.

The Community Role

After the process of developing, implementing and reviewing the impact of the Community Benefit plan is completed for the next fiscal year, Hallmark Health will update the Community Benefits report on the hospital's website. In addition, in an effort to be transparent and collaborative at every level, Hallmark Health will provide the opportunity for the Community to weigh in on the Community Benefit planning process through Community Health Improvement Surveys and focus groups.

One central focus of Hallmark Health's Community Benefits work is to continue to foster relationships with a wider array of community groups and local leaders including faith-based and grassroots organizations. Such relationships provide insight into how these groups view Hallmark Health's role in their community and to strengthen collaboration around how to best meet divergent health needs. In 2008, Hallmark Health joined the Tri-City Hunger Network in an effort to partially fulfill this goal. In 2009, Hallmark Health reinstated its membership on the Melrose Substance Abuse Prevention Coalition and the Melrose Community Coalition, and joined the Reading Substance Abuse Prevention Coalition, and the Everett Talking About Outreach Subcommittee, focused on helping newcomers to access health care services. We will continue to support these important relationships in 2010 and seek ways to further reach out to unserved and underserved areas of our communities through community collaborations.

V. Community Benefit Plan

In accordance with the Community Benefits Guidelines for Non-Profit Acute Care Hospitals, in 2008 Hallmark Health began the process of reviewing and implementing several of the key recommendations outlined in

the Guidelines. In 2009, Hallmark Health formalized a Community Benefits Plan. The primary target populations of focus for 2009 are detailed below:

- The community at large to be prepared for emergencies such as natural disasters, pandemic flu, or terrorist activities.
- Community capacity building by strengthening connections with local groups to avoid duplication of services. This includes offering space to community groups for meetings and events.
- Access to care issues especially focused on uninsured or underinsured residents of our core communities.
- Efforts to engage the un-served and underserved elderly in our communities especially those living in the communities of Everett, Malden, Medford, Melrose, Reading, Saugus, Stoneham and Wakefield where the percentage of elderly residents is higher than the State averages.
- Support for families with children/adolescents at risk due to poverty, isolation, language or cultural barriers, domestic violence, lack of skills to navigate the health care system, or those in need of developing parenting skills. Based on public health data these efforts focused especially on families in Everett, Malden, Medford, North Reading, Melrose, Wakefield, Saugus, and Stoneham.
- Reaching out to families and patients coping with a variety of behavioral health issues.
- Identifying, building awareness, and treating residents at risk for developing cardiovascular disease or those experiencing health issues due to undiagnosed or poorly understood cardiovascular risks including those at risk for developing Chronic Heart Failure (CHF) and for suffering a stroke*.
- Identifying, building awareness, and treating residents at risk for developing diabetes, or dealing with diabetes management issues*.
- Identifying, building awareness, and treating residents at risk for developing cancer with a special focus on breast/uterine and cervical cancer, skin cancer, lung cancer and colorectal cancers*.
- Identifying, building awareness, and treating men and women needing bone and joint health awareness with a focus on injury prevention, arthritis, osteoporosis prevention and detection, and falls prevention*.
- Improving medical care through recruitment, education, and training of nurses, physicians, and other practitioners.

(*Due to the pervasive scope of these last three target populations, the focus area is primarily on the eight CHNA 16 communities including Everett,

Malden, Medford, Melrose, North Reading, Reading, Stoneham and Wakefield.)

The hospital's Community Benefit's Mission Statement was revised and approved by the Hallmark Health Board of Trustees in September 2009. Hallmark Health also developed an ongoing and sustainable Community Benefits process, plan and budget for 2010 that was approved by the Board of Trustees in September of 2009. The plan allows for amendments if a formerly unknown health care need should arise; the amendment process will also include Board approval.

The Community Benefits Advisory Council has begun discussions to identify the full scope and activities of the Community Benefits programs and the processes it will use for reviewing, evaluating and updating the plan. The evaluation measures used will be both operational and outcome-based depending on the program. The budget for the 2010 Community Benefit's programs has been set at a rate similar to the prior year, but may need to be adjusted based on Hallmark Health's ability to continue to access the current level of leveraged resources and funding in this unstable economic climate. In the current year for example, despite their proven excellence in delivering care to families, two of Hallmark Health's key Community Benefits programs, the Healthy Families program and the North Suburban Family Network have experienced significantly reduced funding levels from the state. In addition, reimbursement rates for Medicaid patients and Medicare home care patients have been negatively impacted and the reimbursement rates for the Robert Dutton MD Adult Day Health and Supportive Day Center have also been negatively impacted.

VI. Progress Report: Activity During the Reporting Year

Hallmark Health is proud to have offered \$4,853,543.000 in Community Benefit expenditures with \$2,275,262.00 going directly to Community Benefits and Services programs. This is an increase of over \$570,673.00 from 2008, despite decreases in state funding as a result of the economic downturn. As a result of the unprecedented economic downturn in the state, national and international economy beginning in early 2008 and continuing into 2010, healthcare organizations are experiencing many new challenges. In the past year, both locally and nationally, fewer patients sought elective health care. Personal stress, unemployment rates over 10%, and other health impacts were recognized. The impact on the stock market affected

investment income and access to capital for all businesses, including hospitals. This fiscal uncertainty limited our healthcare organizations' ability to commit resources to necessary capital improvement projects and diminished the available resources of foundations and donors to fund key Community Benefit programs. Although Hallmark Health's mid-year 2009 budget corrections allowed the organization to finish the year competitively, in 2010 the hospital must focus on capital improvements to remain competent and competitive in the marketplace. Our solid commitment to providing Community Benefits will require us to be more creative and collaborative than ever before to be successful in meeting the needs of our communities in this current fiscal environment, and continuing forward into the expected health reforms of the coming years.

Major Programs and Initiatives in 2009

Emergency Preparedness

Hallmark Health clinical staff and administrators participate in multiple local, regional and state activities aimed at preparing for a range of natural and other disasters including pandemic flu and other health emergencies. These activities included meeting with major local businesses, collaborating with more than five local boards of health, participating in a DPH Hospital Emergency Preparedness activities. Key hospital staff members also participate in monthly local emergency planning committees such as the MA Department of Public Health Region 3 Committee as well as the Massachusetts System for Advance Registration (MSAR) initiatives for recruiting, credentialing and registering MSAR volunteers. Many Hallmark Health staff and leadership have also undertaken the Federal Emergency Management Agency (FEMA) training and possess certificates of completion of the National Incident Management System (NIMS) and Incident Command System (ICS 100).

The goal of this initiative is that the community at-large will be prepared for emergencies, both local and more pervasive, and that Hallmark Health will support and strengthen existing community programs and activities focused on emergency preparedness. Hallmark Health also utilizes this opportunity to strengthen its community collaborations with various local and state emergency management agencies and provide education and training in the community. In 2009, the Emergency Department provided education for the pre-hospital ambulance company providers. These programs focus on helping Emergency Medical Providers to be better prepared in emergencies by using strategies such as hypothetical case discussions.

The staff members of Hallmark Health and the Hallmark Health Visiting Nurse Association and Hospice offered support to Seasonal Flu Clinics in the core Hallmark Health communities and provided additional support for H1N1 Flu preparation such as donations of hand sanitizer for schools, education materials for families, and consultation time donated by expert medical staff to support community H1N1 efforts. Other immunizations were provided as needed, through the Emergency Departments (ED), in the Maternity Department, and through the Occupational Health Department.

The Occupational Health Department participated in a variety of community-based outreach programs including TB testing and a drug-testing program for a local police department. Hallmark Health provided at least 200 vaccines to community members this year and thousands of seasonal flu vaccines. As the H1N1 vaccine arrived from the manufacturers later than expected this fall, H1N1 Clinic support was provided in fiscal 2010.

Through the Hallmark Health VNA and Hospice, a community awareness and education program in collaboration with the Massachusetts Department of Agricultural Resources, the American Red Cross, the Wakefield Council on Aging, and the Massachusetts Emergency Management Agency was offered on elder emergency preparedness this fall. Attendees received emergency supply kits for their pets and instructions- such as how to ensure their beloved pet has care if the elder is ill, injured, or evacuated in a storm. The message of “where you go, they go” was successfully delivered.

Hallmark Health provided community Basic Life Support (BLS) Cardiopulmonary Resuscitation (CPR) and Babysitting Classes for more than 200 residents in 2009. In 2010 we will begin offering a new pediatric first aid program for childcare providers and families of young children. Basic Life Support for professionals and Advanced Cardiac Life Support classes were offered through the Center for Professional Development on an ongoing basis in 2009.

The HeartSafe Community program, sponsored by the Cardio Endovascular Department, purchased five (5) Automated External Defibrillators (AEDs) for local community agencies through a Request For Proposals (RFP) process. Each site chosen to receive a defibrillator completed a needs assessment tool. The defibrillators will have ongoing monitoring by Hallmark Health and each site was offered one American Heart Association HeartSaver AED class free of charge. Other HeartSaver AED classes were offered at a discounted rate.

CPR demonstrations were offered at community health fairs to build awareness about the need for the public to learn and perform CPR. In 2010, Hallmark Health plans to train local high school students in a new American Heart Association CPR program “CPR Anytime”. This tested program allows students to learn CPR using a personal manikin which can be cleaned and taken home to train other family members- a great way to engage students in community efforts and to train a large number of community members efficiently and cost effectively.

Access to Care

Increasing Cultural Competency and Diversity

Prior to receiving the Blue Cross Blue Shield Pathways to Culturally Competent Care grant from the Blue Cross Blue Shield Foundation of Massachusetts, Hallmark Health lacked the resources to conduct an in-depth analysis of policies and procedures overseeing patient-centered care and staff recruitment, retention, and training and to obtain direct consumer input from the primary racial, ethnic, and cultural groups in communities Hallmark Health serves. Since receiving the grant, Hallmark Health hired a diversity consultant team. This team conducted a comprehensive organizational assessment in 2008 providing objective data to guide future system changes including cultural competency training and other mechanisms to equip Hallmark Health staff with the ability to provide culturally competent care and to attract and retain diverse staff.

In fiscal year 2009, Hallmark Health System has continued on the path to facilitate long-lasting organizational change. The organization has continued to work with the Harvard Pilgrim Healthcare Foundation’s Institute for Linguistic and Cultural Skills to plan for and provide education and training of Hallmark Health staff, providing them with the skills they need to best serve diverse populations. In 2009, the Diversity Steering Committee expanded to include staff members as well as leaders. The group met quarterly. More than four hours of education and training on the topic of cultural diversity was provided to all Hallmark Health leaders. Demographic data about the Hallmark Health service area and expanded information about accessing interpreter services were also shared with the leadership team.

In early 2010, twelve Hallmark Health employees from a cross section of the organization were chosen to receive forty hours of training in the Foundational Design and Facilitation Skills for Cultural Competency

Trainers. In November, a Training and Organizational Development Specialist was hired to ensure all Hallmark Health employees receive diversity training as a component of their annual training requirements and that Hallmark Health attracts and retains diverse staff. The system-wide training for all employees will begin in March of 2010.

Financial Counseling

Hallmark Health's Financial Counseling staff work to screen uninsured and underinsured individuals and provide case management to newly enrolled Mass Health recipients. The Financial Counselors also assist patients with the re-determination process to help ensure there are no coverage lapses. The Financial Counselors have worked collaboratively with community partners such as the North Suburban WIC program to enroll clients in Mass Health as well as attending many local community events such as Heart Sense, and various health fairs. The financial counselors take on the important role of helping clients navigate, the often confusing, health care system, not just signing them up for insurance.

In fiscal year 2009, the Hallmark Health Financial Counselors assisted over 2,000 low-income individuals apply for financial assistance, educated 800 people in the eligibility and member responsibilities of new health coverage and assisted over 500 people in choosing a managed care plan and a Primary Care Physician. The financial counselors have worked with clients in accessing food stamps, prescription drugs, dental services, and mental health benefits as well as access to specialty care.

One of the major accomplishments is in the provision of culturally sensitive services. Many of those served have been from an array of cultural and ethnic backgrounds. One of our Financial Counselors is multi-lingual and has aided individuals whose primary language is Spanish. Through the use of interpreters services, we are also able to assist all other languages requested including but not limited to Chinese, Cantonese, Vietnamese, Arabic and Russian. We have also created brochures, which explain the process for navigating the health care system. This brochure is now translated into Portuguese and Vietnamese and is a critical tool for the communities, which Hallmark Health serves. Cities such as Everett, Malden and Medford are increasingly diverse with growing numbers of Asian and Brazilian immigrants.

Transportation Support

In 2009, Hallmark Health provided transportation to help underserved senior residents in Medford, Malden, and Melrose access healthcare. Partnering with the Malden Council on Aging, a shuttle bus operates between various community stops and the Melrose-Wakefield and Lawrence Memorial Hospitals and Malden Family Health Center. In Medford, a transportation service provides several scheduled stops daily between Lawrence Memorial Hospital, Lawrence Memorial Medical Services at 101 Main Street and various locations between the senior center, nutrition programs, clinics, and health-related appointments. Since December of 2008, the service is now offered on an on-call basis with door-to-door service. Hallmark Health System also provided more than \$33,000 in cab vouchers for patients experiencing financial hardships. In addition, transportation is provided for the elderly behavioral health patients enrolled in the Partial Hospitalization program. The Partial Hospitalization program provides intensive short-term psychiatric services for patients that do not require 24-hour inpatient care but need more than is offered through traditional outpatient services in the community.

Lifeline Program

Hallmark Health maintains a Lifeline Emergency Response Program, which gives subscribers the confidence to continue to live independently in their own homes through a lifeline unit. This unit, consisting of a small in-home communicator hooked up to the client's telephone, is activated for assistance by the push of a button that automatically dials a central monitoring station. This service was provided to more than 2,000 area residents in 2009. Lifeline staff also presented educational programs on independent living, safety, and falls prevention throughout the region during 2009.

Interpreter Services

Hallmark Health offers free interpreter services in full compliance with MA General Law as well as the regulations of the Office of Civil Rights. The service is available 7 days per week, 24 hours per day, to our non-English speaking health care system patients. The interpreter services department is currently managed through the health system's scheduling department. The Interpreter Services Department noted an increase in interpreter requests from 1444 requests in 2007, to 1666 requests in 2008; a 15.4% increase in the total number of requests. In 2009, there were 1997 interpreter requests, an increase of 19.9 % over the past year. Three new language need requests were also noted; for Somali, Bengali, and Teo Chow, a dialect of China.

The diverse nature of the Hallmark Health patient population is reflected in over 35 different language requests including, but not limited to: Spanish, Chinese, Portuguese, Vietnamese, Russian, Arabic, and Haitian. Interpreter Services also provides written translation services and Telecommunications Device for the Deaf (TDD) and Teletypewriter (TTY) Services for hearing-impaired patients. Each hospital campus has at least one TDD/TTY phone with portable machines that are available for installation in patients' rooms. Hallmark Health is a member of the Massachusetts Coalition of Coordinators of Interpreter Services.

Addressing Needs of At-Risk Families

Hallmark Health provided substantial support, intervention and education to pregnant and parenting women, their partners and their families, especially those living in Malden, Medford, and Everett. A great benefit was making programs accessible at one location-239 Commercial Street in Malden. WIC, Healthy Families and three grant funded programs, *Feeling Fit & Fabulous* nutrition and exercise for WIC pregnant clients, *Creative Coping* parent support groups, and the *Mothers Helping Mothers* donated clothing and equipment closet are all located at this one site. Offering this array of services in a “one stop shopping” approach decreases stress, strengthens coping and parenting skills, and improves the overall well being of the children and families served.

Women, Infants and Children (WIC) Nutrition Program

Funded by the United States Department of Agriculture (USDA) and the Massachusetts Department of Public Health, the North Suburban Women, Infants and Children (WIC) Nutrition Program provides food and nutrition services to prenatal and postpartum women and to infants and children under the age of five at five local sites. In 2009, it served more than 6,000 low and moderate-income participants from Malden, Everett, Medford, Melrose, Reading, North Reading, Stoneham, Wakefield, Wilmington and Woburn. Participants receive nutrition education on topics such as diet during pregnancy, feeding infants and children, and the benefits of breastfeeding as well as referrals to other health and social services. In addition, participants receive checks for nutritious foods to redeem at local grocery stores or pharmacies. This year North Suburban WIC nutritionists presented free nutrition workshops to parents, clinical professionals, and childcare providers throughout the region; and in 2009, the program successfully transitioned to a new food package including whole grains, more fresh fruit and vegetables, and low fat milk.

Fit and Fabulous

“Feeling Fit and Fabulous” WIC, is very successful program funded by special WIC funding. The program serves a vulnerable population helping in the prevention of gestational diabetes and obesity in pregnancy. Mothers meet with a trained facilitator weekly throughout the last two trimester of pregnancy to learn about healthy nutrition and effective exercise, such as walking that will support their optimum prenatal health and that of their baby.

The Mothers Helping Mothers Closet

The free “Mothers Helping Mothers” program for families with children from pregnancy to school age is also located at the Malden WIC site. Through the system’s five-site WIC program, donated “lightly-used” clothing and baby care items are provided to families in need. The money saved by families is then available to supplement their food budget, an average of \$65.00 per visit for each family. Families are allowed to visit the program monthly and local social service agencies also utilize the program to assist their clientele. More than 550 families are served annually.

Mornings with Moms

During the winter months, when parents are especially isolated, the WIC program provides a weekly support and play and learn group at the Malden WIC office. A healthy lunch is provided and the WIC Peer Counselors provide resources and referrals as appropriate. This program is especially popular with families living in shelter. This may be the only time during the week that these mothers are able to find some respite, a hot served meal, and have someone care for them.

Baby Café

In affiliation with the UK-based Baby Café Charitable Trust, the Melrose-Wakefield Hospital Baby Café is the first Baby Café to open in the United States. It provides pregnant and breastfeeding mothers a friendly and comfortable environment to learn more about breastfeeding. In the Baby Café, mothers can relax, share tips and techniques, and socialize with other moms. One-on-one help from specially trained health professionals is available, including professional lactation support and WIC peer counselors. Babies can be also weighed and breastfeeding assessed at the Baby Café, providing additional support for parents. In 2009 there were 1,200 visits to the Baby Café. In 2010, the hospital plans to open a second location for the *Baby Café* at the North Suburban WIC site in Malden.

Creative Coping for New Mothers

The Massachusetts Children's Trust Fund (CTF) funds Hallmark Health's Parenting Education and Support Grant - "**Creative Coping for New Mothers**" providing free, weekly, two-hour education sessions. The goal of these sessions is to reduce stress, offer simple interventions and provide support to mothers with newborns and babies less than one year old. Our model is derived from practical experience that providing peer support and professional guidance at critical moments for inexperienced, isolated new mothers can possibly prevent potential problems related to decreased coping, depression, and difficulties in mother-infant bonding.

North Suburban Family Network

Located at the Franklin School, a few blocks from the Melrose-Wakefield Hospital, the North Suburban Family Network (NSFN) is a community-based parenting education and support program that serves families living or working in Melrose, Stoneham and Wakefield as well as other local communities. The Network, funded by a grant through the Massachusetts Department of Early Education and Care through a partnership with the Melrose Public Schools, offers parent/child playgroups, parenting education programs, support groups, family fun activities, as well as information on resources and referrals. Specific programs are offered for grandparents and fathers. The Network is governed by a parent-led community coalition, which over-see numerous programs. Parents and community representatives assist with fundraising, community outreach and program development.

Last year, over 1,600 families participated in the North Suburban Family Networks programs or services. Playgroups, drop in play, workshops and support groups bring in families and children who visit the Family Network on a weekly basis. Monthly workshops on various parenting topics educate an average of 50 caregivers, parents and family service providers. The NSFN drop-in-playroom is visited by an average of 20 families a day. The NSFN Family Assistance program provides needy families with food, clothing, household equipment, and toys.

Parents Need Special Care Too

In 2009, The Melrose Sharing and Caring Foundation funded the NSFN to pilot one group for parents coming home with babies from local Special Care Nurseries. This group will begin in March 2010 and is a collaboration between Hallmark Health Maternity Services, Winchester Hospital, Early

Intervention, and the Eastern Middlesex Association of Retarded Citizens. The program is designed to serve a vulnerable population and will be facilitated by the social worker from the Hallmark Health Maternity Services in conjunction with staff from Winchester Hospital.

Hallmark Health Healthy Families

Hallmark Health provides a Healthy Families home-visiting program for first-time parents age 20 and under, living in Everett, Malden, Medford, Melrose, North Reading, Reading, Stoneham, and Wakefield. Funded by the Children's Trust Fund and also supported by Hallmark Health, services are free for participants and their families during pregnancy and until the child turns three. Services include home visiting, mentoring, role modeling, prenatal and parenting education, parenting activities, and groups for young parents. In addition, services include educational classes such as prenatal classes, infant care, CPR, and First Aid. The Hallmark Health Healthy Families program received 82 referrals and served 124 families in 2009. Staff and managers are actively engaged in collaborative partnerships to benefit the children, families, and communities.

Community partners include the Joint Committee for Children's Health Care in Everett, Malden High School Teen Parent Program, Malden/Everett Family Network, Medford Family Network, North Suburban Family Network, Melrose/Stoneham/Wakefield Community Partnership for Children, Everett Community Partnership, Medford Health Matters, Healthy Malden, City of Malden Office of the Mayor, North Suburban WIC, Hallmark Health VNA, Tri-City Mental Health, Malden Department of Social Services, Malden Department of Transitional Assistance, Tri-City Early Intervention, Criterion-Medford Early Intervention, Criterion-Stoneham Early Intervention, Tri-CAP Headstart, Child Care Circuit, Everett Public Schools, Medford Community Partnership, Medford Parent-Child Home Program, Malden Family Health Center, Malden Community Partnership for Children, North Reading/Reading Community Partnership, Massachusetts Alliance on Teen Pregnancy, and the Healthy Families Community Coalition.

Shaken Baby Prevention

Each year statistically there are 50,000 reported cases of Shaken Baby Syndrome in the United States according to the American Association of Neurological Surgeons 2000 study and one in four results in death. Through the Middlesex District Attorney's Office Shaken Baby prevention program and the CTF program "Babies Cry: Have a Plan" Hallmark Health has

trained its Maternity and family support staff in teaching parents and caregivers about the issue and providing them with concrete tips and tools for coping with the frustrations of a crying baby. In 2009 MWH Maternity provided information on luggage tags for all discharged maternity patients to remind them of the tools they have learned to use when their baby cries.

Domestic Violence Prevention & Education

Hallmark Health staff members were very instrumental in the establishment of domestic violence coalitions in two of the communities it serves: Wakefield and Stoneham. Community members approached Hallmark Health Community Teams about the need to do more to address the issues of domestic and family violence in both communities. The response has helped mobilize these two communities to be able to develop ways to understand the root causes of violence and to start to institute prevention programming in the schools and increase awareness among community members. During 2009, Hallmark Health helped to strengthen both the Wakefield Alliance Against Violence (WAAV) and the Stoneham Alliance Against Violence (SAAV) through supporting fundraising and education efforts in both the schools and the community.

In addition to the support it provides for the prior mentioned programs, Hallmark Health also continues to support two other very successful local domestic violence initiatives, Melrose Alliance Against Violence (MAAV) and the Portal to Hope program housed at the LMH. Domestic violence prevention education is integrated into the plan of care for all inpatient and outpatient programs. Education materials are distributed at health fairs and other events and domestic violence issues are addressed through the Emergency Departments, Maternity Services, Hallmark Health Healthy Families, the North Suburban Family Network and other key hospital departments.

Portal to Hope

Hallmark Health has donated office space annually, since 2003 to *Portal to Hope* at its Lawrence Memorial Hospital campus in Medford. Portal To Hope, a nationally recognized non-profit organization, provides comprehensive services to people whose lives have been impacted by domestic violence, sexual assault and stalking crimes.

Programs for Older Adults

Senior Citizens Health Services Program

This program provides community outreach for the elders of Medford, Stoneham, Winchester and surrounding communities through the utilization of a registered nurse at several housing sites, senior centers, and assisted living facilities. The program served over 2,000 seniors in 2009. The Medford Senior Drop-In Center offers nursing services such as nursing assessments and referrals, B-12 injections, blood pressure screenings, and individual health conferences. The program also provides education programs on topics ranging from healthy aging to diabetes management.

The Dutton Center Adult Day Health and Supportive Day Program

The Dutton Center Adult Day Health and Supportive Day Program offers Social Day Care for all seniors and Adult Day Healthcare for those with special physical, cognitive or emotional needs. In addition to counseling, support groups, supervision, and socialization, the program offers activities such as music programs, arts and crafts sessions, games, and exercise groups. In 2009, the program had an average daily census of 45 clients with a capacity of 50.

The Parish Nurse-Community Outreach Program

The Parish Nurse Program of Hallmark Health Visiting Nurse Association (HHVNA) provides non-invasive health care and supportive services. The program is supported in part through a \$5,000 donation from St. Joseph's Parish in Malden. In early 2009, the program closed with the retirement of its nurse leader. The blood pressure screenings, health education programs, and nurse counseling clinics are now offered through the Hallmark Health VNA and Hospice.

Community Outreach Programs for Older Adults

Hallmark Health Visiting Nurse Association sponsors health care counseling clinics and education programs for older adults at senior housing sites and Councils on Aging through its Community Outreach Program for Older Adults. Registered nurses with extensive experience and training in geriatric health provide health counseling and referral, educational programs, and exercise and nutrition classes on an ongoing basis. In addition, in 2009, more than a dozen health screenings and resource fairs were held. Screenings included blood pressure, blood sugar, osteoporosis, eye and hearing. Flu immunizations clinics were also sponsored in the fall. More than 4,000 older

adults (and families) were served through these outreach programs and services.

Senior Suppers

The Senior Suppers program was started in 2009 and has become a huge hit with elderly residents in our service area. In the spring, summer and fall of 2009, seniors were invited to each hospital (LMH one month and MWH the next) for a low-cost meal, blood pressure screening, entertainment, raffle prizes, and health education. Hallmark Health leaders and employees served the meals and socialized with participants. After the health lectures the speakers often receive many calls with requests for additional information or support for themselves and their friends and families. It is hard to determine which group enjoys the evenings more, the participants or the Hallmark Health employees.

Programs for Vulnerable Populations- Behavioral Health Depression Screening

Approximately 19 million Americans have experienced depression in their lifetime. 2008 Massachusetts data demonstrates that 6.7% of resident reported being sad or depressed for more than fifteen days per month and 9.1 % reported that for fifteen days or more each month, they experienced poor mental health. To address this issue and provide the public with education regarding depression and other mental illnesses and the resources available through Hallmark Health, in October of 2009, depression screening was offered in Medford and Reading. The program was offered in observation of National Depression Screening Day. Residents found needed assistance and were provided referrals to treatment service through the Behavioral Health Department of Hallmark Health.

Community Counseling

The Community Counseling Program treats adult and geriatric clients in need of psychiatric outpatient care. When clients have limited financial resources and lack insurance coverage, adjustments to fees are made to ensure that they receive the needed care without service interruption.

Grandparents Raising Grandchildren in Harmony

For the past five years, the NSFN has offered a program for grandparents raising grandchildren. The grandparent support program has a regular attendance of twelve grandparents. The sessions take place twice a month; and offer support and information. In 2009, the program received grant funding from the Eileen Fisher Foundation to support their efforts. The

funds will be utilized to contract for educational services with *Families First*, a local parenting resource organization with more than twenty years of experience. In 2009, grandparents were surveyed to identify their topic interests, to allow the NSFN to plan for the education programs. Also in 2009, one of the grandparents was chosen by the State Senator Richard Tisei to represent the region as part of a statewide council discussing the issues faced by this population.

Support for Behavioral Health Patients in the Emergency Departments

Behavioral health visits for severely ill patients to the Melrose Wakefield Hospital Emergency Department have doubled during the past five years. Behavioral health diagnoses such as alcohol or opiate abuse, depressive disorders, bipolar disorder and many others bring over 250 patients to Hallmark Health Emergency Departments monthly. These patients are adults, adolescents, and children and often require extensive treatment and referrals. This is a key population requiring consideration in the Emergency planning process. In fiscal 2010, the hospital is planning to enhance the behavioral health support available through the emergency departments.

Support Groups

Cancer Center Groups

The new Cancer Center in Stoneham offers a variety of cancer support groups to aid families in coping with the physical, social, and emotional aspects of cancer. Facilitated by nurses, social workers and other clinical members, groups are held at the Cancer Center. One of the groups offered in 2008 was a four-part series entitled, "*I Can Cope*" which includes sessions on learning about cancer and cancer treatments, understanding feelings and family relationships, discovering resources, and celebrating life.

Diabetes Support Groups

The Diabetes Support Groups are partially funded by a grant from Partners Community Health Initiative (PCHI) and meet monthly at both the MWH and LMH campuses. This program receives clinical support from the hospital's Diabetes Self Management Team.

Alzheimer's Caregiver Support Group

The Alzheimer's Support Group provides education and support for families and caregivers of Alzheimer's patients. The group meets monthly at Lawrence Memorial Hospital.

Dementia Caregivers Support Group

The Dementia Caregivers support group meets monthly at LMH. The program provides a community-based forum for support of caregivers of people with dementia to lessen caregiver fatigue and isolation, and to increase the safety of residents with dementia. The program averages nine attendees monthly.

Hallmark Health VNA and Hospice Support Groups

In 2008, the Hallmark Health VNA and Hospice offered a series of ongoing support groups to help those who have experienced loss including nine ongoing support groups such as *Loss of a Spouse or Partner*; *Adult Child Loss of a Parent*; *Loss after Sixty*; and a Holiday Support Group. A program for children, who have experienced loss “Kids in Grief”, which utilizes expressional therapies, was also offered in multiple sessions last year.

Caregivers Support Group funded by Mystic Valley Elder Services

Residents over forty that are caring for an elderly friend or family member are invited to attend the bimonthly Caregiver Support Group at the Dutton Center. Each month one session is devoted to community speakers who provide information to assist participants with common issues, such as how to access local services and financial planning for their loved ones. An average of five residents regularly attend this twice-monthly group.

Bariatric Surgery Support Group

The Bariatric Surgery Department at Lawrence Memorial Hospital provides a support group for those who are either waiting to have surgery or those who have experienced it. The group meets on a monthly basis. Those who are post-surgery provide social and emotional support to those who are waiting for surgery in order to help ease anxiety and share their own experiences. A surgeon, clinical and department staff lead the group in addressing issues such as post-surgery management skills and nutrition.

Support for Prevention, Education, Screening and Chronic Disease Management

Community Services

Hallmark Health Community Services Department instituted a series of health education forums and screenings in 2009 in partnership with other Hallmark Health departments and services and many community partners. Listed below are some of the events offered free of charge to residents in the communities Hallmark Health serves:

- Red Dress Day, HeartSense for Women, is an annual event that provides lectures on risks and symptoms of women's heart disease, the impact of family history on health, nutritional counseling, and resources for exercise, medication review with a pharmacist, and important health screenings. In 2009, over fifty women attended.
- Peripheral Vascular Disease (PVD) Screening was offered to increase community and individual awareness of the risk of peripheral vascular disease. In 2009, more than sixty community residents were screened.
- The first of a three-part diabetes education program, The Top Ten Tips to Take Care of Your Diabetes Health was offered in 2009 through the new Diabetes and Endocrinology Center at Lawrence Memorial. More than forty residents came to increase their awareness of this life-changing illness and identify ways they could take better care of their health.

Smoking Cessation Program

In 2008, Hallmark Health provided individualized support and education to patient and employee smokers and in November of 2008 all of Hallmark Health's campuses became "smoke-free". Education and information was shared system-wide and throughout our communities to promote public awareness, and classes and support groups were offered for employees to assist them with this transition. In 2009, Hallmark Health continued to focus on this important public health topic by developing additional resources for both employees and patients, focused on helping them with the skills and support they need to successfully quit smoking. Three eight-week smoking cessation sessions were offered with a support program following each class. Low cost, nicotine replacement products were also offered to employees and non-employees for purchase in both the LMH and MWH gift shops. Forty-two clients were served; twelve of them have successfully quit smoking.

Community Health Education

Hallmark Health is committed to giving community members the necessary information to live healthier, more productive lives by offering a variety of educational opportunities. We honor our commitment to providing health education to our communities in a variety of ways, including tuition waivers, free community trainings, providing information at town festivals and fairs, and through referrals to agencies and departments which provide free and low-cost health services. Classes include childbirth education, pain

management for labor and deliver, breastfeeding, infant care, sibling adjustment, classes for new dads and monthly tours of Maternal-Newborn Services at Melrose Wakefield Hospital. Our safety education classes are taught by American Heart Association certified instructors and include CPR and First Aid Training. These courses are designed to give community residents, both lay and healthcare workers, the skill necessary to help save lives. Other courses, such as babysitting, promote wellness and safety awareness for young adults.

Occupational Health Community Outreach

The Occupational Health Department includes employee health, infection control and workers compensation. In addition, Occupational Health participates in a variety of community-based outreach programs. Programs in 2008 included TB testing and support for local flu clinics.

Cardiac & Pulmonary Rehabilitation Programs

These programs focus on exercise and education. Patients meet regularly to receive counseling on the physical, psychological, and emotional impact of their condition, and learn from the staff and each other about heart disease, smoking cessation, and nutrition. The Rehabilitation Department provides community education through speaking engagements such as fall prevention, monthly back school, and pre-surgical education programs for people having elective hip and knee replacements. These programs are offered at various sites throughout the service area.

Cardiac Education Services

In 2009, through the Cardiac & Endovascular Center at Melrose-Wakefield Hospital, cardiac risk-prevention education and screening were provided throughout the Core Hallmark Health communities. Nationally it is estimated that cardiovascular disease will strike one in every three individuals in their lifetime.

Stroke Awareness

In response to an initiative through the Massachusetts Department of Public Health, hospitals statewide have been charged with increasing the number of residents educated about the signs and symptoms of stroke. A hospital committee has been convened to determine the most effective ways to promote stroke education in the hospital and in the community. Members of the stroke committee take individual responsibility for promoting this important health topic. Hallmark Health System Stroke Committee

members participate in local community fairs and health fairs, senior suppers sponsored by the hospitals, educational programs at community senior centers and in the Hallmark HeartSense programs. During these events they distribute brochures and information on stroke prevention, and early recognition of signs and symptoms. At the health fairs, nurses monitor blood pressures and programs are offered at community senior centers offering more in depth discussions, and question and answer opportunities on stroke and other health issues.

HeartSense For Women- Education and Screening

“Many women don’t realize that heart disease is the number one killer of women (and also men) in the United States. Over 250,000 women die from heart attacks each year – this is six times the amount who die from breast cancer,” said Dr. Khether Raby. “By holding the HeartSense for Women, Red Dress Day Event, we hope to save women’s lives through education. Increasing awareness of heart attack risk factors and symptoms will help enable women to recognize the problem and seek treatment immediately, which can lead to lifesaving treatment.” Dr. Raby was the keynote speaker at the first *HeartSense For Women* program held in February of 2009. Hallmark Health recognizes the threat heart disease poses for women of all socio-economic and ethnic backgrounds. This five-session program was funded by a grant through the Rite Aid Foundation focused on serving women from Medford, Malden and Everett.

Bone and Joint Preventative Health Services

In 2008, Hallmark Health identified the need for support and education around bone and joint protection for the aging population served in our core communities. From arthritis, to osteoporosis, to “Falls Prevention” and “Back Clinics”, this has been an important year for this service. Through the work of our dedicated nurses and physicians, in addition to raising awareness and educating the public, the treatment methodologies for surgical patient care are changing. All patients are pre-screened for methicillin resistant staphylococcus aureus (MRSA) infections helping to reduce inpatient infection rates. Patients also receive counseling and support prior to surgery to prepare them for their hospital stay. Finally, post surgical care has been modified to move patients through physical therapy routines safely, but more quickly, allowing them to discharge earlier. In most cases, patients are able to return home with support from home care staff rather than spending costly time in rehabilitation facilities. This work has continued in 2009.

Rehabilitation Services in the Community

Through the Hallmark Health Rehabilitation Services a variety of community lectures were offered this year including *Back School for Injury Prevention*- offered in multiple locations across the service area, *Proper Ergonomics and Exercises for Your Back and Neck*, *The Young Athlete and Concussion*, and *Common Athletic Injuries in Children and How to Prevent Them*. In addition the Rehabilitation Department also contacts with local schools for athletic training and support many Hallmark Health programs such as the Bone and Joint Camp.

Management of Chronic Disease: Targeted Excellence in the Treatment of Patients with Chronic Heart Failure

Heart failure is the leading cause of hospitalization in the United States, especially among patients older than 65. The cost of heart failure in the United States was estimated at 32.2 billion in 2007, according to the American Heart Association (AHA), *Heart Disease and Stroke Statistics: 2007 Update*. Much of this cost is a result of numerous hospitalizations. *Circulation: Heart Failure*, a journal of the American Heart Association, estimates that 25% of CHF patients are back in the hospital within thirty days of a hospital admission. At the onset of the CHF program in 2006, Hallmark Health had a disappointing 39% thirty-day readmission rate for CHF clients. To address this issue, Hallmark Health began the process of reviewing inpatient data and implementing strategies to lower these rates.

Through reviewing clinical and patient reporting systems, Hallmark identified a need for a stable inpatient education program, outpatient measuring tools such as bathroom scales and measuring cups, and an outpatient education program. Further study led to a professional education program for hospital-based and local nursing home staff to improve their care of the CHF patient. The overall impact of the program efforts has been dramatic. In 2009, the system average thirty-day readmission rate for CHF or similar diagnosis has dropped to 12.9%, a 26.0 % reduction in the overall readmission rate. In 2009, we served over 3,000 patients admitted with heart failure...90% of these patients were 65 years old or older. Now when patients leave the safety of the hospital, they are making much better decisions based on their education, evidence based best practice, and culturally and language appropriate specific instructions to assist them to better manage this complicated disease.

Management of Chronic Disease: Diabetes Self-Management Program

Diabetes Education and Awareness helps patients get blood sugar under control through diet and exercise and making healthy lifestyle choices. The Diabetes Self-Management Program works with patients and their doctors to address all aspects of diabetes management, from lifestyle and emotional issues to medical treatments and long-term health concerns. The Diabetes Self-Management Program offers group or 1:1 classes on some of the following topics: What type of diabetes you have and how does it affect you and your treatment; Weight loss techniques and up to date methods to prevent diabetes; Meal planning and learning about carbohydrates and their effect on you; and Weight loss strategies for both Type I and Type II diabetics.

Healthy Kids- School Nutrition Program in Melrose

In 2009, the Hallmark Health Nutrition Department, with assistance from Team Melrose, conducted a 3-week Nutrition series with all 12 of Melrose's 5th grade classes, at Horace Mann, Roosevelt, Winthrop, Lincoln, and Hoover Schools. Each week, a Registered Dietitian would meet with individual classes to review various topics, including the Food Guide Pyramid, Understanding Food Labels, Portion Distortion, and Eating for Performance. Students also learned the importance of balancing 'calories in with calories out'.

"Our goal was to provide the students with the tools and knowledge to make educated decisions about the foods they eat and their physical activity to help them grow into healthy adults," commented Kim Talbot, RD LDN, Clinical Nutrition Manager for Hallmark Health System. "We have such a talented team of Registered Dietitians and I am so appreciative of everything they have done for this huge community outreach program." In the end, Hallmark Health's Nutrition Department had approximately 900 interactions with 5th graders in Melrose. Ingredients and supplies for preparing the Team Melrose Wellness Mix were provided by the Food & Nutrition Departments at Melrose-Wakefield and Lawrence Memorial Hospitals. In 2010, the program will be expanded to add a component of exercise, and will be offered to other local school systems.

Supporting and Enhancing Medical Education

Hallmark Health is committed to promoting and supporting the professional development of nurses, allied health professionals and physicians through the Lawrence Memorial/ Regis College Nursing Program, the Lawrence Memorial/ Regis College Radiography Program, relationships with

community partners such as Salem State College School of Nursing, Tufts Medical Center, and other affiliations and partnerships.

Lawrence Memorial Medical Associates

Located at 101 Main Street in Medford, Lawrence Memorial Medical Associates is an outpatient facility providing diagnostics, medical, and orthopedic services within the community. Services including laboratory, nutrition, mammography, and bone densitometry, ultrasound and orthopedics. In addition, there are four internal medicine practices staffed by four primary care physicians and two nurse practitioners. The Lawrence Memorial Medical Associates functions as one cohesive unit delivering quality health care to the community. These practices also provided more than 800 hours to mentor and train physicians in 2009.

Continuing Medical Education

Hallmark Health supports and promotes medical and clinical education and research conducted in response to a previously assessed community need. In 2009, Hallmark Health offered continuing medical education and Schwartz Center Rounds to all members of the medical staff, non-staff physicians, as well as to administration, nurses, and ancillary personnel involved in patient care. Staff time at the medical libraries and the Center for Professional Development is also dedicated to medical, clinical, and ancillary education.

Nursing Research and Leadership

The Nursing Department at Hallmark Health has developed a strong leadership model to support their clinical practice. Nursing has instituted a Nursing Council whose mission is to develop educational activities that improve patient outcomes and patient safety and foster the professional development of the staff. In 2009, the nursing staff at Hallmark Health addressed the most common worry of surgical patients, fear of getting sick to one's stomach and vomiting, or postoperative nausea and vomiting (POV). Surveys suggest that thousands of patients have put off or even foregone needed surgery because of this fear. An assistant professor of nursing at the Lawrence Memorial Hospital/Regis College Nursing Program, anesthesiologists, and other clinicians at Lawrence Memorial Hospital developed a highly successful seven-step pilot program to prevent and/or minimize POV. During the pilot period, which lasted several months, no surgical patients experienced postoperative vomiting and only 5 percent reported feeling nauseous - to the delight of the patients and the hospital administration

The Lawrence Memorial/ Regis College Nursing Program

The Lawrence Memorial/ Regis College Radiography Program

The Lawrence Memorial/Regis College Nursing Program was established in 1924 as a hospital-based diploma program. In 1988, the school signed a collaborative agreement with Regis College to confer an Associate of Science nursing degree formalizing a long-standing affiliation. Today, the associate degree-nursing program is an integral part of the Hallmark Health System, which provides financial assistance through grants to qualified nursing students and employs many students within the healthcare system. Throughout the curriculum, and as part of their learning experiences, students provide nursing care to patients in the HHVNA and the hospitals of the Hallmark Health System. In 2005, the program set a new record for nursing enrollments, helping to meet high industry demand for these vital caregivers. Both faculty and students in the nursing program are actively engaged in community activities. The Lawrence Memorial Hospital/Regis College Medical Radiography program opened in August 2004 as an effort to meet the shortage of technologists and continues to operate in Medford.

Strategies for Sustaining Community Benefits Activities

Hallmark Health funds the majority of its Community Benefits programs through generous donations, grant writing, and targeted fundraising efforts. In the challenging financial climate of 2009, the hospital utilized staff from many departments, the Fund Development staff, and a contracted grant writer to ensure programs had sustainable funding to continue providing services to the community. With decreased funding available as a result of the economy, this has become an especially arduous and time intensive process. Hallmark Health is committed to continuing to seek new funding streams to support the health care needs evidenced in the communities we serve.

Notable Challenges, Accomplishments and Outcomes

In 2009 the most notable challenge to Hallmark Health's Community Benefits Program was the challenging global economic crisis that affected the hospital and every community served by Hallmark Health. These challenges had wide spread impact on area residents, from usually more affluent suburban communities, to moderate-income suburban areas, but especially hard hit were low-income elders, and families with young children. The state budget, that funds some of Hallmark Health's key initiatives and programs was greatly reduced with programs such as the North Suburban Family Network, Healthy Families, and the Dutton Center

severely impacted financially. Despite budget reductions, these programs either maintained their level of services or increased the number of residents served, a credit to the employees of the programs who often worked long hours and used creative strategies to ensure that high quality services were provided with less resources.

Another key challenge continues to be correlating increase in unemployment and long-term unemployment, which has impacted the utilization of non-emergency health services in both the inpatient and outpatient areas of the hospital and also the Hallmark Health VNA and Hospice.

Despite the challenges faced, Hallmark Health is proud of its accomplishments in 2009. A few key programs follow:

- *Improving the Pathways to Culturally Competent Care:* In 2008, Hallmark Health conducted an organization assessment to determine how to improve the organization's ability to provide high quality care to culturally diverse patients and families residing in the region. In 2009, Hallmark Health utilized the knowledge gained from this assessment to educate and train leaders at all levels of the organization. In 2010, the program is focused on educating all Hallmark Health employees and securing funding to ensure the sustainability of the program.
- *Comprehensive Award Winning Breastfeeding Services-system-wide:* Hallmark Health has had tremendous success with our comprehensive breastfeeding programs. We are increasing both the numbers of mothers initiating breastfeeding at birth and also those continuing to breastfeeding into the first year. Our services are seamless from Childbirth Education to WIC, to Maternity and Home Care services and on into the first year of a child's life through programs such as the North Suburban Family Network and the *Baby Café*'. In 2010, the hospital plans to open a second site for the *Baby Café* in Malden, and to complete the "Baby Friendly" credentialing process.
- *Targeted Excellence in the Treatment of Patients with Chronic Heart Failure* is a comprehensive patient and professional education program integrated across the Hallmark Health system to improve the care of the CHF patient and prevent costly re-admissions.
- *HeartSense for Women* is a five-session education and screening program for women in Everett, Malden, or Medford. The program is funded by the Rite Aid Foundation to educate women and the community about identifying and mitigating the risks for heart disease in women.

- *The Robert Dutton, MD, Adult Day Health and Supportive Day Center* is committed to enriching the lives of clients by providing quality clinical and social services in a safe, supportive, and stimulating environment. The Center, established in 1978, focuses on both the social and medical needs of clients.

VII. Next Reporting Year

The approved budget for Community Services and Benefits is similar to last year. We will continue to seek grant and foundation funding and apply fundraising strategies to expand our resources. This will allow us to develop and implement additional programs and services to meet the existing and newly identified needs of our target populations.

In 2010, the Community Benefits Advisory Council will continue to act as the planning committee for Hallmark Health's Community Benefit Plan by defining the process for recognizing the current and emerging health needs in the community and developing the Community Benefit Plan to respond to these identified needs. This process will include defining measurable outputs and outcomes for the Community Benefit programs, making budget recommendations and formalizing the plan through approval by the hospitals' Board of Trustees.

Projected Outcomes

- The community at large will be better prepared for emergencies such as natural disasters, pandemic flu, or terrorist activities through the efforts of Hallmark Health. This will be measured through the numbers of encounters with community service agencies at meetings addressing this topic, through counted educational and awareness materials distributed in the community, by counted hits to our web page for updated information and links to other public service agencies.
- Hallmark Health will focus on increasing its grass roots and faith-based community connections. The number of affiliations and the depth of these connections will measure the success of this goal.
- The number of residents receiving medical services, community benefit services, financial counseling, and/or transportation will increase. This outcome will be measured with a focus on ensuring access to the uninsured or underserved residents of our core communities.
- More un-served and underserved elderly in our communities will receive needed preventative, medical and health services especially those living in the communities of Everett, Malden, Medford, Melrose, Reading,

Stoneham and Wakefield where the percentage of elderly residents is higher than the State averages. The numbers of elders attending programs and receiving services will be measured.

- More families at risk due to poverty, isolation, language or cultural barriers, domestic violence, lack of skills to navigate the health care system, or those in need of developing parenting skills will be served in the community benefits programs. Based on public health data these efforts will focus especially on families in Everett, Malden, Medford, North Reading, Melrose, Saugus, Wakefield and Stoneham. The number and type of services accessed will be measured. In addition correlating outcomes such as breastfeeding initiation and sustainability will be measured.
- The numbers of families and patients coping with a variety of behavioral health issues and using services such as transportation and support groups will be monitored.
- Residents at risk for developing cardiovascular disease or those experiencing health issues due to undiagnosed or poorly understood cardiovascular risks including those at risk for developing Congestive Heart Failure (CHF) and for suffering a stroke will receive education and information and in some cases community benefits programs with measurable outcomes. Attendance will be tracked*.
- Identifying, building awareness, and treating community members at risk for developing diabetes or with diabetes management issues.*
- Community members at risk for developing cancer with a special focus on breast and cervical cancer, skin cancer, lung cancer and colorectal cancers will receive education and screening. Attendance at classes and screenings will be monitored*.
- Men and women needing bone and joint health awareness with a focus on injury prevention, arthritis, osteoporosis prevention and detection, and falls prevention will receive education and information and in some cases community benefits programs with measurable outcomes. Attendance will be tracked*.
- Identifying, building awareness, and treating men, women, and children with weight management issues, with a specific focus on obesity prevention for adults and children.*
- Improving access to medical care for the target populations through recruitment, education, and training of nurses, physicians and other practitioners.

For all of the focus areas, prevention and health improvement strategies will be key components of the Community Benefits programs.

(*Due to the pervasive scope of these last three target populations, the focus area will be primarily on the eight CHNA 16 communities including Everett, Malden, Medford, Melrose, North Reading, Reading, Saugus, Stoneham and Wakefield.)

VII. Contact Information

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Attachment 2

Annual Report Standardized Summary

HALLMARK HEALTH SYSTEM, INC. *Report for Fiscal Year 2009*

Community Benefits Mission

Hallmark Health System, Inc. is committed to building and sustaining a strong, vibrant, and healthy community. Hallmark Health dedicates appropriate resources to collaborations with community partners and the

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utilization of community member's input toward improving health services. Hallmark Health pledges to act as a resource and to work with the community during emergencies; improve access to care; identify, monitor, and address the unique health care needs within its core communities; and promote healthier lifestyles for residents through health education and prevention activities.

Program Organization and Management

Hallmark Health's Department of Community Services administers community-based public health programs, identifies unmet health needs, and provides a link to various organizational health services within the community. The department also acts as a resource to leverage funds used to implement and measure the impact of Community Benefits programs. The System Vice President for Home Care and Community Services, who reports to the President and Chief Executive Officer, supervises the Director of Community Services. The Hallmark Health Community Benefits Advisory Council was convened in 2009 and is responsible for developing the Community Benefits Plan that is approved by the Hallmark Health Board of Trustees.

Key Collaborations and Partnerships

As part of its efforts to improve the health status of its core communities, Hallmark Health participates in a variety of broad-based community coalitions and initiatives that work towards addressing the specific and general health needs in these cities and towns. A sample of current membership and affiliated initiatives include:

- Malden High School Teen Parent Task Force- teen parent support.
- Mystic Valley Elder Services- programs for elders, chronic disease management.
- The Tri-CAP Hunger Network- nutrition resources.
- Melrose Alliance Against Violence, Wakefield Alliance Against Violence, and Portal to Hope- domestic violence prevention.
- The Joint Committee for Children's Health Care in Everett- access to care issues, services for families at-risk.
- Medford Health Matters, The Substance Abuse Prevention Coalition of Melrose, and the Reading Coalition Against Substance Abuse, substance abuse prevention.

Community Health Needs Assessment

Hallmark Health has used a variety of strategies to identify the health care needs of the residents of its service area. The following groups have provided input:

- The Community Benefits Advisory Council
- Community Outreach Teams of Malden, Medford, Melrose, Reading, Stoneham and Wakefield.
- The Patient/Family Advisory Councils of both hospitals.
- Community Coalitions
- The Community Health Network Areas (CHNAs)

In addition:

- Public health and other reputable health status indicators have been reviewed.
- An on-line survey is posted on the website, is available at health fairs and community events, and will be translated into five languages.
- Contracted with the Northeast Regional Center for Healthy Communities to assist with planning and implementing community focus groups.

Community Benefits Plan

Hallmark Health drafted the 2009 plan in collaboration with the Community Benefits Advisory Council, which includes community members. The target populations, priorities and measures follow:

- To develop new community relationships and monitor contacts.
- To prepare for emergencies in the community, measured by attendance at meetings.
- To provide access to care for uninsured and underinsured residents measured through usage of services.
- To serve un-served and underserved elderly monitored through attendance and outcomes.
- To provide services for families at risk, monitoring caseloads and outcomes.
- To educate citizens at risk for developing cardiovascular disease, diabetes, bone and joint disease/injury, obesity, or cancer measured through attendance.
- To assist under served residents with chronic disease management, measured through attendance.

Key Accomplishments of Reporting Year

Hallmark Health offered more than \$4,853,543.000 in Community Benefit expenditures with \$2,275,262.00 going directly to Community Benefits and Services programs. This is an increase of over \$570,673.00 from 2008, despite decreases in state funding as a result of the economic downturn.

- The Breastfeeding program continued to increase numbers of mothers initiating, and continuing to breastfeed at three and six months.
- The Robert Dutton, MD, Adult Day Health and Supportive Day Center provided 11,253 care and support visits for frail elders.
- *Pathways to Culturally Competent Care*, funded by the Blue Cross and Blue Shield Foundation provided extensive diversity training.
- *HeartSense for Women*, funded by the Rite Aid Foundation educated women in Everett, Malden, and Medford about their risks for heart disease.
- The Chronic Heart Failure Care (CHF) program improved care for patients both in the hospital and in the community.

Plans for Next Reporting Year

- Hallmark Health is committed to continuing to develop and maintain a diverse well-trained work force.
- The Northeast Regional Center for Healthy Communities has been contracted to help plan and implement community focus groups.
- Reporting software has been purchased and staff has been hired to assist with training and data collection system-wide.
- Extensive grant writing and fundraising is planned to provide additional resources to support new Community Benefits programming and sustain existing programs.
- The system will explore new ways in which to connect with the community such as developing a multi-community task force to work on emerging community health needs.

Contact

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Providing Access to Care for Underserved Populations:

Following the Pathway to Culturally Competent Care- Funded by the Blue Cross Blue Shield Foundation of Massachusetts

In 2007, Hallmark Health received funding from the Blue Cross Blue Shield Foundation of Massachusetts to improve the provision of culturally competent care provided to residents in the Hallmark Health service area. During the first year, the Diversity Steering Committee convened, with members of senior management selected to represent their disciplines. Harvard Pilgrim Health Care Foundation's Institute for Cultural Insight was hired to conduct a comprehensive organizational self-assessment of policies, procedures, and practices involved in patient care, staff development, recruitment, and retention. In the second half of the year, the Harvard Pilgrim consultants conducted surveys of targeted staff members, and senior leadership. They implemented directed patient satisfaction surveys and focus groups of patients and members of the Patient Advisory Councils. The consultants also worked with Hallmark Health staff in completing the Office of Minority Health Institutional Audit (Scales 1-6).

In July 2008 the consultants delivered an analysis of the findings and a summary report of the assessment. The assessment found that staff members from both hospitals were proud of their institutions. Both employees and stakeholders felt that the assessment process was a positive step in helping the hospitals better serve diverse communities. Hallmark Health's effort to increase patient satisfaction was also seen as an

opportunity to improve their ability to specifically serve diverse populations. The stakeholders shared that from their viewpoint the hospitals are not accessed by minority populations except for emergency care. Patients bypass both hospitals for routine care to use hospitals that better meet their needs. This includes hospitals that have a more diverse workforce and provide a more welcoming environment for diverse patients. Comments from Hallmark Health employees bore this out, expressing that cultural competency was not a “front burner issue” and that they had concerns about whether they had the skills to meet the needs of diverse patients

In fiscal year 2009, Hallmark Health System has continued on the path to facilitate long-lasting organizational change. The organization has continued to work with the Harvard Pilgrim Healthcare Foundation’s Institute for Linguistic and Cultural Skills to plan for and provide education and training of Hallmark Health staff, providing them with one of the skills they need to best serve diverse populations. In 2009, the Diversity Steering Committee expanded to include staff members as well as leaders. The group met quarterly. More than four hours of education and training on the topic of cultural diversity was provided to all Hallmark Health leaders. Demographic data about the Hallmark Health service area and expanded information about accessing interpreter services were also shared with the leadership team.

In early 2010, twelve Hallmark Health employees from a cross section of the organization were chosen to receive forty hours of training in the Foundational Design and Facilitation Skills for Cultural Competency Trainers. In November, a Training and Organizational Development Specialist was hired to ensure all Hallmark Health employees receive diversity training as a component of their annual training requirements and that Hallmark Health attracts and retains diverse staff. The system-wide training for all employees will begin in March of 2010.

Hallmark Health has also hired the Northeast Regional Center for Healthy Communities to assist in planning and implementing community focus groups to gather community input about issues such as access to care related to cultural diversity practices. This work will begin in March of 2010. There are also plans to review the patient satisfaction measurement tools to ensure they include issues of diversity.

Since the implementation of the project, the Interpreter Services Department has noted an increase in interpreter requests from 1444 requests in 2007, to

1666 requests in 2008; a 15.4% increase in the total number of requests. In 2009, there were 1997 interpreter requests, an increase of 19.9 % over the past year. Three new languages were also requested in the Emergency Departments of Melrose-Wakefield and Lawrence Memorial Hospitals in fiscal 2009, Somali, Bengali, and a dialect of China, Teo Chow.

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Promoting Wellness of Vulnerable Populations: Integrated Breastfeeding Services:

Exclusive breastfeeding is recommended for the first six months of life and partial breastfeeding to at least twelve months of age. Today in the United States 70 % of women initiate breastfeeding at birth and 33% percent

continue to breastfeed for six months. Currently based on Hallmark Health hospital data, 69% of mothers initiate breastfeeding at birth, an increase from 45% when Hallmark Health first began tracking breastfeeding data in 2001.

The breastfeeding initiation rate at the Hallmark Health North Suburban Women Infants and Children (WIC) program is higher at 76.7%, with 45% of these mothers continuing breastfeeding for at least three months and 34% for at least six months. The goal of Healthy People 2010 is to increase those percentages to 75% of mothers initiating breastfeeding at birth and 50% breastfeeding until six months. The Economic Research Service of the United States Department of Agriculture estimates that achievement of this goal nationwide would result in an annual savings of over 3.6 billion dollars due to reductions in infant morbidity.

To achieve the recommended gains in mothers initiating and sustaining breastfeeding, Hallmark Health provides support and services in an integrated model throughout the system, providing every mother the opportunity to begin nursing soon after birth and to continue breastfeeding throughout the first year. Pre-birth free and low-cost classes are offered through Hallmark Health's Community Health Education Department and WIC provides classes and support groups. Individual counseling is also available through Hallmark Health's Breastfeeding Support Center. Scholarships for these services are available for underserved women.

After birth, lactation services are also available to all new mothers. At discharge, support and education is available through the *Melrose Wakefield Hospital Baby Café*; a free drop-in center offering support and assistance from professionals, WIC Breastfeeding Peer Counselors and other moms in a relaxed environment. Morning and evening groups are offered. Last year there were 1,200 visits to the *Baby Café*. Moms in need of individual assistance can schedule private consultation visits. In addition, new mothers are offered support at the North Suburban Family Network and through the North Suburban WIC program. Teen breastfeeding mothers, when enrolled, receive additional help through the Hallmark Health Healthy Families Newborn Home Visiting program. Healthy Families provides breastfeeding education, support, and encouragement during pregnancy, postpartum, and infancy. They also connect young pregnant and parenting teens with breastfeeding resources and supports, and provide access to Hallmark Health's Breastfeeding classes.

For Moms and babies that are unable to leave home in the first weeks of life due to prematurity or illness, lactation services and supports are made available by specially trained maternal child health nurses through Hallmark Health Visiting Nurse Association. Maternal child home visits for breastfeeding support are supported through donated funds.

In fiscal year 2009, Hallmark Health began the application process to become a *Baby Friendly* Hospital. The *Baby Friendly* Hospital Initiative is a global program sponsored by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) to encourage and recognize hospitals and birthing centers that offer an optimal level of care for lactation. As a component of this initiative the entire nursing staff, 50% of the employed physicians, nineteen pediatricians, and many of the NSFN and all of the Childbirth Education staff have completed a breastfeeding on-line training program. Each WIC staff member receives weeklong breastfeeding training on hire, and annual training thereafter. Front-line staff will also receive four hours of hands-on education.

In January of 2010, Hallmark Health began offering "rooming-in" as routine care for all healthy mother-baby couples to offer additional support for this integrated breastfeeding program. In addition, for fiscal year 2010, the North Suburban WIC program has received supplementary state funding to open a lactation support program in Malden and to hire an additional Breastfeeding Peer Counselor. Our hope is that this will be a secondary site for the Melrose-Wakefield Hospital Baby Café.

In the past two years, Melrose Wakefield Hospital has received two awards from the Massachusetts Department of Public Health related to breastfeeding. One award was for eliminating the distribution of formula discharge bags to mothers. The second award was for receiving the Certificate of Intent to become a *Baby Friendly* hospital.

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Management of Chronic Disease: Targeted Excellence in the Treatment of Patients with Chronic Heart Failure

Heart failure is the leading cause of hospitalization in the United States, especially among patients older than 65. The cost of heart failure in the United States was estimated at 32.2 billion in 2007, according to the American Heart Association (AHA), *Heart Disease and Stroke Statistics: 2007 Update*. Much of this cost is a result of numerous hospitalizations. *Circulation: Heart Failure*, a journal of the American Heart Association, estimates that a quarter of CHF patients are back in the hospital within thirty days of a hospital admission. At the onset of the CHF program in 2006, Hallmark Health had a disappointing 39% thirty-day readmission rate for CHF clients. To address this issue, Hallmark Health began the process of reviewing inpatient data and implementing strategies to lower these rates.

Through reviewing clinical and patient reporting systems, Hallmark identified a need for a stable inpatient education program that would translate into better patient understanding of their disease process, improved management across the care spectrum, and identified specific core improvement strategies with the overarching goal to improve the patients' ability to manage their disease. This challenged the staff to change the way they traditionally handled CHF patients. A retrospective audit was performed to identify reasons for readmission. Interviews with the nursing staff revealed a critical need for nursing education, patient education both in the hospital and in the community, and education and community outreach to local nursing homes and rehabilitation centers.

In 2007, a new program *Targeted Excellence in the Treatment of Patients with Chronic Heart Failure Care* (CHF) was launched. The program is well grounded in terms of community impact, cost containment and the delivery of quality health care. Heart failure is a complicated disease. It presents challenges for both health care professionals and patients. During the past few years, more responsibility has been placed on the patient to take control of their disease. Some patients are able to meet the challenge, but most are not. Hallmark Health System recognizes that this is a risk that needs to be shared. To meet this shared responsibility, this comprehensive program was needed to foster improved care for patients with CHF both in the hospital and in the community.

A multi-disciplinary CHF Committee was convened in 2006, which included representatives from Cardiology, Quality Resources, Nursing, Pharmacy, Nutrition Services, Respiratory Services and Hallmark Health VNA and Hospice, Inc. A comprehensive CHF Patient Education Booklet was developed and utilized for all CHF patients. CHF education now begins when a patient's arrives on a nursing unit and continues throughout the patient's stay, culminating in a thorough discharge summary and support process. Throughout the patient's hospitalization, there are multiple and varied reminders and opportunities afforded to provide and document patient education. An instructional sheet with critical CHF information is available in the prevalent languages in the Hallmark Health communities: English, Italian, Portuguese, Spanish, Vietnamese, Haitian Creole and Cantonese. Seasonal educational approaches are also used such as "Let's Keep Them Home for the Holidays" released in October, and a June release entitled "Barbeque Tips: No Chips for you." These materials are available on-line at *CHF Online*: www.hallmarkhealth.org.

A CHF Nursing Education Module was also developed, which is still in use today. The presentation includes a CHF review for nursing and stresses patient education. The goal is to involve all levels of nursing care to monitor readmissions, identify opportunities for improvement and further education. Since its inception, this team has evolved into a CHF Nursing SWAT Team, which is used by other departments or committees throughout our health system as a "train the trainer" model. By expanding the scope and including additional staff, the effort to focus continual improvement opportunities to improve CHF care has expanded across the system and sixty-six employees have been trained.

Recognizing that physicians are a critical component in the education and improvement processes, all HHS physicians receive the “Clinician’s Guide to Heart Failure Management” from American College of Cardiology every six months. Reminders are also on display in the nursing units and in physician work areas. The Quality Resource Department periodically monitors medical records for compliance and communicates the findings as appropriate. Opportunities to improve are communicated to individual clinicians as necessary. As creative and innovative initiatives were slowly inserted into the admission process, dramatic results were noted. In the first year alone (2007-2008) of monitoring this statistic, the 30-day readmission rate was decreased by over 15% for patients admitted with this diagnosis.

By November of 2008 – a new component of the program, *CHF Home Management Program* was underway. Patients identified at discharge that did not qualify for VNA services, but at risk for continued complications are targeted. At discharge, the patient ‘wins a free ticket’ to three one-hour sessions at Cardiac Rehabilitation centered on continued development of CHF management skills. Easy to read scales and measuring cups are given to each patient enrolled to complement the education process. Thirteen patients were served.

In December of 2008 – another component, *Partnering with Our Professional Receivers* was also launched. The CHF Nursing SWAT team is collaborating with local nursing homes and rehabilitation centers to offer the CHF Presentation. The goal is to have these nursing centers evaluate their current CHF management and identify areas for improvement. This effort has been very well received and has recently expanded into more broad based educational opportunities. Hallmark Health representatives have done presentations for COPD, Post Operative Care for Joint Replacement, and are designing presentations for Wound Care and an Anticoagulation Update. Four nursing facilities received CHF education programs.

The overall impact of the program efforts has been dramatic. In 2009, the system average thirty-day readmission rate for CHF or similar diagnosis has dropped to 12.9%, a 26.0 % reduction in the overall readmission rate. In 2009, we served over 3,000 patients admitted with heart failure...90% of these patients were 65 years old or older. Now when patients leave the safety of the hospital, they are making much better decisions based on their education, evidence based best practice, and culturally and language appropriate specific instructions to assist them to better manage this complicated disease.

In 2010, the program plans to recruit a CHF disease management nurse champion to evaluate every inpatient and reach out to family members to improve home management- the beginnings of a true community based disease management process. As CHF is a chronic disease, proper management in the home setting would demand life style changes for the client. With the continued development of the CHF program, it may be advantageous to create a CHF clinic where patients can be referred at discharge from inpatient setting, from VNA or from physicians' offices to continue their education, before an admission is necessary or is imminent. This clinic would educate the client in home management of their disease, medications, anticoagulation therapy, and fluid and diet control while encouraging their efforts to enhance their life style and adopt healthy changes. The clinic would also reach out to participating family members to encourage support in the home. Finally, we would like to augment our current "Healthy Heart Series" and other public events by presenting CHF management in more public venues.

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Health Screening and Education: *HeartSense for Women funded by the Rite Aid Foundation*

“Many women don’t realize that heart disease is the number one killer of women (and also men) in the United States. Over 250,000 women die from heart attacks each year – six times the amount who die from breast cancer,” said Dr. Khether Raby. “By holding the Heartsense for Women, Red Dress Day Event, we hope to save women’s lives through education. Increasing awareness of heart attack risk factors and symptoms will help enable women to recognize the problem and seek treatment immediately, which can lead to lifesaving treatment.” Quoted from Dr. Khmer Raby, the keynote speaker at the first *HeartSense for Women* program held in February of 2009.

Hallmark Health recognizes the threat heart disease poses for women of all socio-economic and ethnic backgrounds-but especially for racially and ethnically diverse women. To educate women about this risk, a grant through the Rite Aid Foundation was obtained in October 2008. Three of the cities Hallmark Health serves were the focus area of the grant, Medford, Malden and Everett. In Malden, 12.9% of the population is below poverty level; 60.9% of the population is Asian, African –American, Hispanic or other. Of the Medford population, 6.4% is below the poverty level, 13% of the population is Asian, African American or other. In Everett 11.8% of the population is below poverty level, 20.3% of the population is Asian, African-American, Hispanic or other.

In February 2009, a forum was held in the City of Medford at the Lawrence Memorial Hospital School of Nursing. In this four-hour forum, more than fifty women received heart health, nutrition, and pharmacological information. Participants were encouraged to take advantage of the blood pressure and body mass index (BMI) screenings. Information on family health history, health insurance benefits, stress relief and other women’s health issues were also made available. Women were encouraged to talk to their primary care physician and ask about heart health. If they did not have a primary care physician, assistance was given in finding one.

HeartSense for Women was offered again in April 2009 at the Malden Family Health Center. Dr. Karyn Entrop and Dr. Viviana Tiba addressed the specific heart disease risks that women face and preventative measures that can be taken to reduce those risks. Family health history was also a focus of the event. Participants were asked to fill out a family health history form and if there were gaps in their history, encouraged to ask family members to fill in those gaps when possible. Medical benefit information as well as blood pressure and BMI screenings was also offered. Twenty-two women participated in this forum.

The third *HeartSense for Women* forum was held in June 2009 at Everett City Hall. This event was a collaborative effort that included the Joint Committee for Children's Health Care in Everett (JCCHCE) and the Everett Rotary Club. Virginia Verge RN BSN, one of the founders of the Hallmark Health Cardiac Rehabilitation Program, presented the lecture on recognizing heart disease. The importance of knowing your family health history was also covered. Medical benefit information as well as blood pressure and BMI screenings was offered. Twenty women attended this event.

Evaluations were collected after each event. According to these evaluations, women were enthusiastic about losing weight, reducing stress, improving nutrition, and talking to their primary care physicians about their heart health. Many left saying that they had never truly understood that women's heart disease was so different than men's, especially heart attack symptoms.

In October 2009 the grant was extended to include two additional forums. In the end, over one hundred and fifty women will be screened and educated in the three target communities. The goal is that understanding their risks and making healthy lifestyle changes will help to improve not only their heart health, but also the overall health of these women and their families.

This project brought together many departments throughout the Hallmark Health System. The Community Services Department took the lead and collaborated with the Cardiac and Endovascular Center, Financial Counseling, Physicians practices and Cardiac Rehabilitation, to reach out, provide financial counseling if needed, and educate and screen women in the communities served by Hallmark Health.

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Serving Vulnerable Populations- Elders: *The Robert Dutton, MD Adult Day Health and Supportive Day Center*

The Robert Dutton, MD, Adult Day Health and Supportive Day Center is committed to enriching the lives of clients by providing quality clinical and social services in a safe, supportive, and stimulating environment. The staff at the Center promote hope and support to the aging and disabled and, at the same time, strive to promote wellness, independence, and dignity. The Center, established in 1978, focuses on both the social and medical needs of clients. Staff is experienced in the areas of adult and supportive day health, and many have worked together at the Center for more than ten years. This continuity provides clients with a unique team approach to care

The Dutton Center offers Social Day Care for all seniors and Adult Day Healthcare for those with special physical, cognitive or emotional needs. In addition to counseling, support groups, supervision, and socialization, the program offers activities such as music programs, arts and crafts sessions, games, and exercise groups. The comprehensive programs and services offered at the Center help reduce client's stresses and fears and help improve

the client's physical stamina. Clients renew interests, have more vitality, and develop a sense of purpose. Programs also help clients improve mental functioning, continue independence in the community, improve nutrition, allow for re-socialization, and help in developing new friendships.

All of the programs provide a multidisciplinary approach, and a highly structured milieu for those whose needs are socialization, structure and support; medical monitoring and treatment; specialized programming for memory impairment; and psychiatric/mental health counseling. The Dutton Center staff members work closely with agencies and companies to provide a variety of quality enrichment programs. Registered nurses, rehabilitation therapists, occupational therapists, geriatric-psych nurses, and podiatrists provide many of the clinical services. Additional clinical services are provided as needed.

The dementia component of the program is designed to meet the needs of clients suffering from some degree of memory loss, confusion, and disorientation or defective judgment, who need a supervised, structured, and caring environment that compensates for cognitive, physical, and social deficits. The goal of this component is to promote maximum cognitive physical and psychological functioning in an effort to maintain dignity, self-respect, and independence.

The psychiatric component is designed to meet the needs of older adults with major mental illness who need a transition program or a period of consolidation and support as they return to the community. The program offers multidisciplinary evaluation and collaboration with community care providers. Our experience has shown that older adults can make significant gains in this structured program in the maintenance of emotional stability and prevention of further hospitalizations.

The Dutton Center has gradually seen an increase in the number of clients served and the number of visits per client; a 6% increase in 2008 and an 8% increase in 2009. In fiscal 2009, the program had an average daily census of 45 clients, with a capacity of 50 clients. The Center served an average of 937.75 clients per month and provided 11253 visits over the entire year. State funding issues in 2009 have reduced the state reimbursement rates for clients suffering from cognitive and emotional needs. This budget reduction means that Hallmark Health needs to provide additional financial support to the program to ensure a high quality of care for these truly needy clients.

The Dutton Center is a benefit to the community in other ways. The Dutton Center supports two intergenerational programs through the Greenwood School and the Northeast Metro Vocational Technical High School Health Occupations and the Culinary Arts Department. The Center also participates in the Food Pantry and Clothing Closet at the First Parish Congregational Church in Wakefield by collecting and transporting food and clothing that has been donated by the client's families.

The program also provides respite for families of elders. In 2009, the Center received funding from the Executive Office of Elder Affairs under the Older Americans Act awarded by Mystic Valley Elder Services to develop a Caregiver Support Group for Dutton Center client families and other community residents. In collaboration with the Hallmark Health VNA and Hospice, Inc. the program is available twice monthly, and is designed to provide support, education, and companionship for families and friends caring for infirmed elders. Last year, 25 clients attended. Services at the Center can delay or prevent the need for placement in a long-term care facility, reduction in hospital/emergency department visits by their loved one, and cost effective health care.

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Community Benefit Expenditures- 2009

Community Benefits Programs

Estimated* Total Expenditures for 2009

1. Direct Expenses: \$ 891,493
2. Associated Expenses: \$143,732
3. Determination of Need Expenditures: N/A
4. Employee Volunteerism \$ 32,761
5. Other Leveraged Resources \$ 1,009,049

Estimated Program Budget for 2009

\$2,100,000

*Excluding Net Charity Care contributions.

Community Service Programs

1. Direct Expenses \$ 149,201
2. Associated Expenses: N/A
3. Determination of Need Expenditures: N/A
4. Employee Volunteerism \$ 13,501
5. Other Leveraged Resources \$35,525

Net Charity Care or Uncompensated Care Pool Contribution

\$ 2,546,981 (Excluding Hallmark Health VNA charity care)

(Not including bad debt which totaled approximately \$1,382,000)

Corporate Sponsorships

\$ 31,300

TOTAL: \$4,853,543

(Excluding bad debt)

Total Patient Care Related Expenses for Fiscal Year 2009:

\$232,448,123

Addendum:

Hallmark Health incurred the following costs during FY 2009:

- a. \$12,795,000 for Medicare shortfall and un-reimbursed services
- b. \$4,28,000 for MassHealth un-reimbursed services
- c. \$1,382,000 in total bad debt

