

UVM Health Network-Porter Medical Center
Community Health Needs Assessment
Progress Report
June 1, 2017

In addition to the progress reported below on chronic conditions and disease management topics included in our CHNA, the UVM Health Network-Porter Medical Center has made great strides in addressing the issue of *Access* to necessary health services in the following ways:

Expansion of our new “Porter Access Center” (centralized scheduling center) to serve the majoring of our outpatient practices, as well as our hospital surgical care center and radiology departments. Through this process, patients have more timely access to primary and specialized outpatient services, as well as preventive health screening tests/procedures such as colonoscopy and mammography.

Also, as noted below, we are in the final stages of expanding our MAT (Medication Assisted Treatment for those who have been diagnosed with an Opioid Dependence Disorder) program from a single site in Bristol to a second site in Middlebury in order to provide greater access to this essential service for members of our community who must travel for this type of care.

Finally, we will be opening a new “Porter ExpressCare” service in mid-June to provide more convenient access to “urgent care” for our community in a setting that is less expensive than our hospital emergency department.

The Middlebury Health Service Area has been working on a long list of initiatives related to nutrition, obesity and other chronic conditions. Following are just a few of those initiatives:

- **YDPP – YMCA Diabetes Prevention Program**
 - The program offers evidence based processes and group support to help you lose weight, get more active, and develop healthier eating habits. A complete re-set like this takes time and commitment and the program is built help you succeed with lots of group support. We are just completing one workshop (a yearlong program) and will begin another in September 2017.
- **Tobacco Cessation**
 - We completed one cessation workshop with three people completing. Three more workshops are planned for 2017.
- **Healthier Living with Chronic Disease**
 - For those dealing with a long-lasting (chronic) disease—like arthritis, diabetes, cancer, obesity or heart disease. This workshop provides support to help people living with chronic diseases manage and improve their health. Participants will learn about problem solving and action planning, nutrition, exercise, medication use, emotions, how to talk to their healthcare providers and more.
 - We have just completed this workshop with five completers with another planned for the fall of 2017.
- **WRAP - Wellness Recovery Action Plan**
 - For those struggling with a mental health problem—such as depression, anxiety or substance abuse issues. WRAP is a free program that offers support, tips and advice from people who are also working toward emotional wellbeing. We are currently running 6-week workshop in collaboration with the Turning Point Center.
- **Food Insecurity Screening**
 - UVM Health Network Porter Pediatric Primary Care began screening for food insecurity on May 25, 2016. At each well visit, patients are given a two question screen that asks if they have felt worried about

running out of food or if they have been unable to buy more food in the past 12 months. If positive, patients are given a flyer that lists a variety of local resources that may be of help. This flyer includes information about food resources as well as transportation, housing, safety, and mental health agencies. Parenting resources are also listed. Along with the flyer, patients are referred to the care coordinator who follows up by phone. The care coordinator reviews resources and offers further assistance as needed.

- So far, **80 patients** have screened positive for food insecurity. We have had 2294 well child visits since we began this screening. The care coordinator has been able to help patients sign up for 3 Squares benefits, locate food shelves, and access other services that may free up funds for food.

Also, please find under separate cover our Community Health Action Team dashboard. The team is focusing on Prevention, At Risk and High Risk groups with the intent of tackling housing, poverty, social determinants of health, patient lead care plans, quality infant and child daycare, increasing access to opioid treatment and fostering community collaboration across both health and human service sectors.

Middlebury HSA Community Health Action Team Dashboard

Community Partners: Agency of Human Services, Department of Health, Blueprint for Health, Porter Hospital, Porter Medical Group (Practices), Helen Porter Healthcare & Rehabilitation Center, Mountain Health Center FQHC, Middlebury Family Health, Rainbow Pediatrics, Planned Parenthood of Northern New England, Open Door Clinic, OneCare VT, Community Accountable Care LLC, Health First, Vermont Chronic Care Initiative, Addison County Community Trust, Support and Services at Home, Elderly Services, Addison County Home Health & Hospices, Bayada Home Health Care, Addison Respite Care Home, Counseling Service of Addison County, Turning Point Center of Addison County, United Way of Addison County, Addison County Parent Child Center, Addison County Transit Resources, Building Bright Futures

Mission Statement

"Happier and Healthier Together in Addison County."

CHAT Subcommittees/Initiatives

- Primary Prevention: Improving Economic Stability and Developing a Community Culture for Wellness
- Secondary Prevention: Improving Care Coordination and Communication Between Agencies
- Tertiary Prevention: Improving Supportive Housing and Increasing Access to Opioid Treatment

Our Community

2014 and 2015 Attributed lives in Middlebury HSA	# lives
2016 Addison County Population Census:	36,959
2016 Addison County ACO populations (only pts who did not opt out):	10,495
OneCare VT Medicare, Medicaid, BCBS of VT	10,064
Health First Commercial	431
2015 Blueprint for Health (Adult and Pediatric)	19,664

