Mount Sinai Hospital (MSRH) completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on September 30, 2016. SFHMC performed the CHNA in adherence with certain federal requirements for not-for-profit hospitals set forth in the Affordable Care Act and by the Internal Revenue Service. The assessment took into account input from community members, and various community organizations.

The complete CHNA report is available electronically at http://www.saintfranciscare.com/About_Us/Hospital_Publications.aspx or printed copies are available by emailing: plarivie@stfranciscare.org

Hospital Information and Mission Statement

MISSION
We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

CORE VALUES

➢ Reverence:
We honor the sacredness and dignity of every person.

➢ Commitment to Those who are Poor:
We stand with and serve those who are poor, especially those most vulnerable.

➢ Justice:
We foster right relationships to promote the common well, including sustainability of Earth.

➢ Stewardship:
We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.

➢ Integrity:
We are faithful to who we say we are.

Mount Sinai Rehabilitation Hospital’s service area comprises urban, suburban, and rural communities that together form a rich mixture of highly diverse races and ethnicities, and a wide range of socioeconomic categories. Most patients seen have disabilities; spinal cord injuries; brain injuries; and complications due to stroke. Stroke is the most common reason for hospitalization and risk factors include diabetes, obesity and smoking; all of which were identified in the CHNA as priorities. Additionally, patients with Multiple Sclerosis and other neurological diseases are frequently served by Mount Sinai Rehabilitation Hospital. Trauma due to gunshots, violence, motor vehicle accidents and other accidents are also common; as are amputees who suffer with diabetes. Mount Sinai serves to treat the consequences of these conditions with primary treatment and engages in secondary prevention through education, community outreach and programs to reduce incidence.

Mount Sinai serves the entire State of Connecticut. Its primary service area includes 25 towns and corresponds largely with the greater Hartford region. The Hospital’s secondary service area includes 28 towns largely to the west and south of the primary service area.
Hartford’s population of 125,000 is composed of all races and myriad ethnicities. Some 44 percent of its citizens are Hispanic/Latino and 35 percent Black/African American, with subgroups that include refugees and immigrants from Africa, Eastern Europe, the Middle East, Asia, South America, and the West Indies. Additionally, 22 percent of the total population in Hartford is foreign born, bringing a tremendous diversity to the city. The city is proportionately younger than the rest of the state as well as the country; over 25 percent of its residents are under age 17 and only 9 percent are over age 65, compared to 22 percent and 15 percent respectively for the state as a whole. This affects age-related health issues, such as some forms of cancer, violence, and accidental injury. The MSRH has a special focus on veterans and on neurological illnesses especially multiple sclerosis.

**Health Needs of the Community**

The CHNA conducted in 2016 identified 5 significant health needs within the Greater Hartford community. Those needs were then prioritized based on a Community Conversation Meeting that took place on September 13th. The 5 significant health needs identified in the Community Conversation Meeting included:

| Community Safety & Violence                                      | • Ranked as the highest priority at the Community Conversation Meeting  
|                                                                  | • 54% of Hartford residents said it was not safe to walk in their neighborhood |
| Housing Insecurity                                               | • Home ownership is only 26% in Hartford  
|                                                                  | • 32% of renters are subsidized |
| Family & Social Support                                          | • 59% of residents said they “do not trust neighbors”  
|                                                                  | • Limited support for positive health behaviors |
| Employment & Poverty                                             | • Only 59% of Hartford residents are regularly employed  
|                                                                  | • 79% of Hartford household are below adequate income levels |
| Access to Care                                                   | • 50% of residents are worried about the cost of care  
|                                                                  | • 23% of residents don’t have a regular doctor |

In addition to findings from the Community Conversation, the quantitative CHNA data identified other areas of need within the Hartford community and beyond. High rates of obesity, diabetes and heart disease are of concern for both residents and health professionals; tobacco use rates in Hartford are higher than national averages and are similar in adult and youth populations; concerns about access to healthcare are particularly acute for those in need of behavioral health services.

**Hospital Implementation Strategy**

Mount Sinai Rehabilitation Hospital’s resources, mission, goals, strategic priorities and the significant health needs identified through the most recent CHNA process were all considered during the development of the hospital’s Implementation Strategy.

The health priorities for the Mount Sinai Rehabilitation Hospital and the Mandell Center for Comprehensive Multiple Sclerosis Care include:

1. Access to comprehensive rehabilitation facilities (focus on Veterans)  
2. Patient frustration with disjointed rehabilitation care  
3. Lack of coordinated and comprehensive care for MS patients  
4. Increased need for research to better understand MS treatment options
The Physical Medicine and Rehabilitation (PM&R) Service Line at Mount Sinai Rehabilitation Hospital strives to facilitate and enhance individual recovery, function, and optimal performance with an emphasis on those populations with impairments that either place them at risk or result in temporary and/or permanent disability.

It serves as a regional and national leader in the delivery of coordinated rehabilitation services providing:

2015

• Neurology
  - Neurologist 4 days/wk
  - PA Full time
  - Recruiting second neurologist

• Psychiatry

• Urology
  - Urologist 1.5 days/wk
  - Urodynamic RN
  - Ultrasound tech

• Infusion Center
  - Infusion Nurse Full time
  - Per diem Infusion Nurses-2
  - Medical Assistant

• Case Management

• Skilled Therapy:
  - PT (3), OT (2), ST (1) – dedicated MS team

• Neuropsychology

• New Services
  - Pharmacy
  - Integrative Medicine (yoga, acupuncture)
**CHINA IMPLEMENTATION STRATEGY**
**FISCAL YEARS 2016 – 2019**

<table>
<thead>
<tr>
<th>HOSPITAL FACILITY:</th>
<th>Mount Sinai Rehabilitation Hospital</th>
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<tbody>
<tr>
<td>CHINA SIGNIFICANT HEALTH NEED:</td>
<td>Access to Rehabilitation Healthcare Services (focus on veterans)</td>
</tr>
<tr>
<td>CHINA REFERENCE PAGE:</td>
<td>22</td>
</tr>
<tr>
<td>PRIORITIZATION #:</td>
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**BRIEF DESCRIPTION OF NEED:**
Veterans are in need of support programs focusing on their unique set of needs.

**GOAL:**
Improve the resources, and increase the quality of the programs available for Veterans

**OBJECTIVE:**
Enhance the relationship with the Veterans Administration to provide high quality accessible rehabilitation services across the state to veterans in need of support.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**
- Increase staff appropriately
- Establish referral coordinator program to facilitate proper patient transitions to MSRH
- Create educational/training programs

**ANTICIPATED IMPACT OF THESE ACTIONS:**
- Improve access of programs for Veterans
- Broaden array of resources
- Increase participation of Veterans in support programs

**PLAN TO EVALUATE THE IMPACT:**
- Patient Satisfaction Survey Responses
- Conversations with Veterans Administration Leadership
- Number of veterans participating in programs

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**
- Staffing for Outreach to the Veteran population
- Leadership participation at board level or committees with a focus on Healthcare for Veterans
- Amputee Informational series
- Health & Fitness Initiatives through Outpatient Services
- Community Outreach Programs including: Adaptive Rowing; Golfers in Motion; and others.

**COLLABORATIVE PARTNERS:**
1. Quinnipiac University
2. Department of Veterans Affairs

CHNA Implementation Strategy 2016: MSRH
### CHNA IMPLEMENTATION STRATEGY
**FISCAL YEARS 2016 – 2019**

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<tbody>
<tr>
<td><strong>CHNA SIGNIFICANT HEALTH NEED:</strong></td>
<td>Access to Rehabilitative Services (continuity of rehabilitation services)</td>
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<tr>
<td><strong>CHNA REFERENCE PAGE:</strong></td>
<td>22</td>
</tr>
<tr>
<td><strong>PRIORITIZATION #:</strong></td>
<td>2</td>
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</tbody>
</table>

**BRIEF DESCRIPTION OF NEED:**
Provide comprehensive rehabilitation services to those who suffer from brain injury, stroke, heart disease and other chronic illness.

**GOAL:**
Enhance efficiency in recovery, community reintegration and secondary prevention.

**OBJECTIVE:**
Improve long-term functional and health status and improve the likelihood of independent living and a high quality of life.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**
- Education and Training for rehabilitation professionals, patients, and the community
- Research and clinical innovation to advance in the field of rehabilitation medicine
- Advocacy in partnerships to ensure the needs of those with disabilities are recognized, understood, and addressed by policy makers

**ANTICIPATED IMPACT OF THESE ACTIONS:**
- Reduce the likelihood of complications, relapse, and/or re-hospitalizations
- Halt or slow the progression of primary and secondary disabilities (maintain functioning and prevent further deterioration)

**PLAN TO EVALUATE THE IMPACT:**
- Monitor discharge, transfers and readmissions rates
- Report on capability to manage patient population
- Outline set of added services

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**
- Powerful Tools For Caregivers
- Integrative Medicine- Acupuncture, massage on campus
- Monthly Stroke Survivors Support Group
- Spinal Cord Injury Informational Series
- Community Outreach Programs including: Adaptive Rowing; Golfers in Motion and others

**COLLABORATIVE PARTNERS:**
- Acute Care Hospitals and Trauma Centers across the state
- Emergency Department staff
- CT State Department of Public Health
- Stoke Center at SFHMC
| **CHNA IMPLEMENTATION STRATEGY**  
| **FISCAL YEARS 2016 - 2019** |
| **HOSPITAL FACILITY:** | Mount Sinai Rehabilitation Hospital |
| **CHNA SIGNIFICANT HEALTH NEED:** | Access to Healthcare (rehabilitation services for patients with MS) |
| **CHNA REFERENCE PAGE:** | 22 | **PRIORITIZATION #:** 3 & 4 |
| **BRIEF DESCRIPTION OF NEED:** | Provide comprehensive interdisciplinary care for those with Multiple Sclerosis to achieve optimal outcomes. |
| **GOAL:** | Become Center of Excellence for MS. Provide high quality state of the art care to those suffering from Multiple Sclerosis. Expand community access for our Center of Excellence for MS. |
| **OBJECTIVE:** | Expand services area reach beyond current primary service area.  
Increase partners in order to address disjointed care  
Advocate at the payer and legislative level regarding access to services |
| **ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:** | Enhance the coordination of MS Care  
Improve research portfolio and numbers of patients involved in trials  
Integrate State of the art technologies to enhance clinical outcomes |
| **ANTICIPATED IMPACT OF THESE ACTIONS:** | Value driven rehabilitation care across the continuum  
Work with partners to ensure the needs of those with MS are addressed by policymakers |
| **PLAN TO EVALUATE THE IMPACT:** | Measure the development of innovative interdisciplinary care programs  
Increase in portfolio of new technology, trials and robotics (hyperbaric chamber treatment)  
Improved research infrastructure |
| **PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:** | C.A.R.P. Community Adaptive Rowing Program  
Golfers in Motion and other Physical Therapy Programs  
Men’s MS Support Group  
Patient Led Support Group for individuals with MS  
MS International Symposium Patient Day (Education, Resources, support for individuals with MS, families & clinicians)  
MS center facilitated Education Seminars for Patients with MS/families related to DMT options |
| **COLLABORATIVE PARTNERS:** | 1. Multiple Sclerosis Society  
2. Research Support  
3. Mandell Family Foundation |
Adoption of Implementation Strategy

On 1-24-17 the Mission Committee of the Board of Directors for Mount Sinai Rehabilitation Hospital met to discuss the 2016-2019 Implementation Strategy for addressing the community health needs identified in the 2016 Community Health Needs Assessment. Upon review, the Mission Committee recommends approval by the full Board of Directors at their next meeting of this Implementation Strategy and the related budget.

Howard Orr
Mount Sinai Rehabilitation Hospital
Board Chairman

1/25/17 Date