

Community Health Implementation Plan (CHIP)

October 1, 2025 -
September 30, 2028

**Memorial
Community/
MaineHealth
Memorial
Hospital**



Implementation Plan for Community Health Needs Assessment FY2025-FY2028

MaineHealth Hospital: MaineHealth Memorial Hospital

County: Carroll, NH

Health Priority: Social Drivers of Health

Goal of Health Priority: Policy and advocacy steps as a health system to support decrease in SDOH impact; addressing social drivers of health, not just individual health-related social needs.

Strategies	Proposed Measures	Partners / External Organizations
Strategy 1: Increase key age-appropriate social drivers of health (SDOH) screening for inpatient and outpatient.	<ul style="list-style-type: none"> • % of appropriate patients screened for SDOH – inpatient • % of appropriate patients screened for SDOH - outpatient 	<ul style="list-style-type: none"> • MaineHealth CMS SDOH Rules Compliance Committee
Strategy 2: Increase the number of referrals to resources supporting patients with positive SDOH screens.	<ul style="list-style-type: none"> • % of care team members who used findhelp • # of connections made using findhelp • Years 2 & 3: % of patients referred to social worker or case manager 	<ul style="list-style-type: none"> • findhelp Community Engagement Workgroup, Access to Care, Carroll County Coalition for Public Health, external community-based organizations
Strategy 3: Standardize a community-based community health worker (CHW) model and disseminate throughout the MaineHealth service areas.	<ul style="list-style-type: none"> • Year 1: Standard community-based CHW model developed • # of CHW FTEs • # of local hospital communities with CHW FTE • % of CHWs that completed core competency training 	<ul style="list-style-type: none"> • MaineHealth CHW Workgroup, Maine CHW Initiative (including external CHW programs), MaineHealth Medical Group
Strategy 4: Increase connections to coverage and care through Access to Care programs.	<ul style="list-style-type: none"> • # of MaineCare enrollments for people under 21 years old • # of Medicare Savings Program applications submitted 	<ul style="list-style-type: none"> • MaineHealth Access to Care

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County: Carroll, NH

Health Priority: Healthy Eating Active Living

Goal of Health Priority: Improve healthy eating and active living behaviors across the lifespan.

Strategies	Proposed Measures	Partners / External Organizations
Strategy 1: Increase implementation of evidence-based healthy eating active living (HEAL) environmental and policy change strategies.	<ul style="list-style-type: none">• % of Let's Go! enrolled sites that complete the Let's Go! self-assessment• # agencies improving policies or practices	<ul style="list-style-type: none">• MaineHealth HEAL Workgroup
Strategy 2: Increase participation in the Matter of Balance program across the system.	<ul style="list-style-type: none">• # of referrals to Matter of Balance• # of participants in Matter of Balance – Virtual• # of participants in Matter of Balance – in person	<ul style="list-style-type: none">• MaineHealth Healthy Aging
Strategy 3: MaineHealth Food Service Directors will explore and identify strategies that will have an impact on climate change.	<ul style="list-style-type: none">• Year 1: Develop strategy to reduce meat purchasing• Years 2 & 3: \$ spend on animal products	<ul style="list-style-type: none">• Hospital Food Service Director Workgroup, Food & Nutrition Services Operating Model 2.0 Workgroup
Strategy 4: Increase implementation of Food is Medicine (FIM) interventions.	<ul style="list-style-type: none">• # of FIM treatment interventions per local hospital community	<ul style="list-style-type: none">• Food Is Medicine Workgroup

Implementation Plan for Community Health Needs Assessment FY2025-FY2028

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County: Carroll, NH

Health Priority: Mental Health

Goal of Health Priority: Youth Mental Health - Improve the mental health status of Maine youth

Adult Mental Health - Decrease the prevalence of unmanaged depression and decrease number of suicides and suicide attempts.

Strategies	Proposed Measures	Partners / External Organizations
Youth Mental Health		
Strategy 1: Increase awareness and number of youth mental health best practices strategies being implemented/supported by MaineHealth (e.g. MindUp, SOS, Youth / Teen Mental Health First Aid (MHFA), Trauma-Focused Cognitive Behavioral Therapy, Adolescent Community Reinforcement Approach).	<ul style="list-style-type: none"> • # of trainings conducted • # of people trained 	<ul style="list-style-type: none"> • Youth Mental Health Workgroup, youth serving agencies (e.g. youth centers, Parks and Recreation Departments, YMCAs), schools
Strategy 2: Increase the number of referrals to resources supporting patients with positive trauma screens.	<ul style="list-style-type: none"> • Year 1: # of local programs serving ages 19 and under on MaineHealth findhelp • Years 2 & 3: % of pediatric patients with a positive trauma screening and symptomology with a referral action • Years 2 & 3: # of connections to youth serving programs via findhelp 	<ul style="list-style-type: none"> • Agencies offering trauma resources; findhelp Community Engagement Workgroup; MaineHealth Medical Group; MaineHealth CHI Trauma, Resilience, and Innovation
Strategy 3: Increase the number of strategies / positive youth experiences that increase feelings of mattering being implemented / supported by MaineHealth.	<ul style="list-style-type: none"> • # experiences supported/offered 	<ul style="list-style-type: none"> • Youth serving agencies (e.g. youth centers, Parks and Recreation Departments, YMCAs), schools, municipalities

Implementation Plan for Community Health Needs Assessment FY2025-FY2028

Strategies	Proposed Measures	Partners / External Organizations
Strategy 4: Identify impact of social media and cell phone use on youth mental health and promote best practices locally to address the issue.	<ul style="list-style-type: none"> Year 1: % of schools offered assistance with developing personal electronic device policies Year 1: Tip sheets on personal electronic device and social media use created and disseminated Years 2 & 3: % of schools offered assistance with communicating and implementing personal electronic device policies" 	<ul style="list-style-type: none"> Youth Mental Health Workgroup, youth serving agencies (e.g. youth centers, Parks and Recreation Departments, YMCAs), youth mental health experts, schools
Adult Mental Health		
Strategy 5: Provide training to care team members across the healthcare system using Question, Persuade, Refer (QPR) model as part of the Zero Suicide program to effectively address suicidality in patients.	<ul style="list-style-type: none"> % of non-clinical staff trained and recertified in Question, Persuade, Refer model 	<ul style="list-style-type: none"> Zero Suicide grant team, MaineHealth Behavioral Health Ambulatory Services
Strategy 6: Increase community awareness and number of adult mental health best practice strategies being implemented / supported by MaineHealth, to include vulnerable populations	<ul style="list-style-type: none"> # of trainings conducted # people trained Years 2 & 3: # higher risk populations reached 	<ul style="list-style-type: none"> Youth Mental Health Workgroup, National Alliance on Mental Illness (NAMI) New Hampshire
Strategy 7: Meet and/or maintain the MaineHealth target for % of adults screened for depression.	<ul style="list-style-type: none"> % of patients 12+ screened for depression in the last year and, if positive, had a follow-up plan documented within 2 days 	<ul style="list-style-type: none"> MaineHealth Medical Group

Implementation Plan for Community Health Needs Assessment FY2025-FY2028

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Health Priority: Substance Use

Goal of Health Priority: Decrease the prevalence of substance use disorders and decrease the number of drug overdose deaths.

Strategies	Proposed Measures	Partners / External Organizations
Strategy 1: Increase referrals to substance use disorder (SUD) treatment (including ambulatory alcohol withdrawal management (AWM), medication for opioid use disorder (MOUD), contingency management, MaineMom, etc.).	<ul style="list-style-type: none"> Year 1: Plan developed to disseminate stigma training to care team members # of patients receiving buprenorphine 	<ul style="list-style-type: none"> MaineHealth Addiction Specialty Council
Strategy 2: Increase access to harm reduction services (e.g. recovery center, recovery coaches, stigma training, MaineHealth peer support services, Syringe Services Programs (SSPs), drug overdose prevention).	<ul style="list-style-type: none"> # of safer drug supplies distributed to patients / community members # of community members that participated in stigma trainings Years 2 & 3: # of patient encounters with Peer Recovery Partners 	<ul style="list-style-type: none"> MaineHealth Behavioral Health Peer Support Program, hospital emergency departments
Strategy 3: Increase the number of schools working on substance use prevention initiatives, including tobacco (such as Student Intervention Reintegration Program (SIRP), Lifeskills, vaping prevention).	<ul style="list-style-type: none"> # of schools implementing evidence-based substance use prevention programs # of students who completed substance use prevention education % of high school students who vaped in the past 30 days 	<ul style="list-style-type: none"> Schools
Strategy 4: Increase referrals to evidence-based tobacco treatment services to meet and/or maintain the MaineHealth target.	<ul style="list-style-type: none"> % of patients 18+ who were screened for tobacco use within the last 2 years and, if a smoker, received cessation counseling # MaineHealth Medical Group Clinical Orientations at which Brief Intervention & Referral training was provided Years 2 & 3: # of provider referrals to Maine QuitLink per 1,000 patients using tobacco 	<ul style="list-style-type: none"> MaineHealth Center for Tobacco Independence, MaineHealth Medical Group

Implementation Plan for Community Health Needs Assessment FY2025-FY2028

Strategies	Proposed Measures	Partners / External Organizations
Strategy 5: Assess and develop a plan for youth intervention and treatment for SUD.	<ul style="list-style-type: none">Year 1: Assess current state of youth treatment for SUD at MaineHealth	<ul style="list-style-type: none">CHI teams, Programmatic Steering Committee (youth/adolescents), Certified Community Behavioral Health Clinic (CCBHC) workgroup, community based organizations and schools

Implementation Plan for Community Health Needs Assessment FY2025-FY2028

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County: Carroll, NH

Health Priority: Chronic Disease

Goal of Health Priority: Cancer – Reduce deaths from cancer

Diabetes – Improve patient health outcomes through the achievement of proven risk reduction measures for patients with and at-risk for type 2 diabetes.

Dementia – Provide better support and care for people living with dementia and their caregivers.

Obesity / Overweight – Increase adherence to current standards of care for prevention, assessment, management, and treatment of metabolic disease.

Strategies	Proposed Measures	Partners / External Organizations
Cancer		
Strategy 1: Maintain or increase human papilloma virus (HPV) vaccination rate.	<ul style="list-style-type: none"> % patients 13 years old who have completed their HPV vaccinations by age 13 	<ul style="list-style-type: none"> MaineHealth Medical Group
Strategy 2: Increase rates for lung, breast, and colorectal cancer screenings.	<ul style="list-style-type: none"> % of female patients 50-74 seen in the last year who had a mammogram within the last 27 months % of patients 45-75 seen in the last year who had appropriate screening for colorectal cancer 	<ul style="list-style-type: none"> MaineHealth Medical Group
Diabetes		
Strategy 3: Increase the annual number of eligible individuals systemwide that are referred to the Living Well with Diabetes Self-Management Program.	<ul style="list-style-type: none"> # of eligible individuals that are referred to Living Well with Diabetes Self-Management Program 	<ul style="list-style-type: none"> MaineHealth Diabetes Prevention and Control Program, MaineHealth Medical Group
Strategy 4: Increase the annual number of eligible individuals systemwide that are referred to the National Diabetes Prevention Program.	<ul style="list-style-type: none"> # of eligible individuals that are referred to National Diabetes Prevention Program 	<ul style="list-style-type: none"> MaineHealth Diabetes Prevention and Control Program, MaineHealth Medical Group

Implementation Plan for Community Health Needs Assessment FY2025-FY2028

Strategies	Proposed Measures	Partners / External Organizations
Dementia		
Strategy 5: Train care team members in every local health system to provide care for people with dementia.	<ul style="list-style-type: none"> # of participants in dementia education trainings # of local hospital communities represented at dementia education trainings 	<ul style="list-style-type: none"> MaineHealth Healthy Aging
Obesity / Overweight		
Strategy 6: Increase pediatric provider adherence to childhood obesity clinical practice guidelines.	<ul style="list-style-type: none"> Years 2 & 3: % of patients ages 10-17 with obesity class I, II, or III with an HbA1C ever ordered 	<ul style="list-style-type: none"> MaineHealth Pediatric Quality Improvement group, MaineHealth HEAL
Other		
Strategy 7: Implement an educational intervention that demonstrates the impact that climate change and pollution have on overall health.	<ul style="list-style-type: none"> # of educational strategies implemented 	<ul style="list-style-type: none"> MaineHealth Cardiology Department
Strategy 8: At least one practice in each LHS will be applying Silver Diamine Fluoride (SDF) in partnership with and with support from the From the First Tooth program.	<ul style="list-style-type: none"> # of local hospital communities with at least one practice implementing SDF # of SDF trainings Years 2 & 3: # of providers trained on SDF 	<ul style="list-style-type: none"> MaineHealth From the First Tooth