Rhode Island Hospital

Community Health Needs Assessment Implementation Strategy

October 1, 2022 - September 30, 2025

As a result of the Community Health Needs Assessment (CHNA) prepared for Rhode Island Hospital (RIH) as of September 30, 2022, RIH's leadership team, executive management, and other individuals critical to the organizational planning process have created an implementation strategy detailing action item plans covering the period from October 1, 2022 through September 30, 2025 to address the significant needs identified in RIH's CHNA report. Based on the complex health issues in the community, RIH has strategically planned ways to address these significant needs in order to maximize the improvement of the overall health and wellness of residents within its community. As discussed in the September 30, 2022 CHNA, available online at https://www.lifespan.org/sites/default/files/2023-03/RIH2022CommunityHealthNeedsAssessment 03282023.pdf, RIH identified the following issues as significant health needs currently facing its community:

- 1. Access to Healthcare Services
- 2. Access to Mental and Behavioral Health Services
- 3. Social Determinants of Health
- 4. Assistance Navigating Hospital and Community Services
- 5. Community-based Health Education
- 6. Chronic Disease Management

Significant Health Need #1: Access to Healthcare Services			
Actions Planned for Implementation	Resources Planned to Address Significant Health Need	Anticipated Impact on RIH Community	Outside Groups Collaboration
1.1 Collect social demographics for complaints and grievances in LifeChart to better identify concerns related to equity.	 Lifespan Information Services Lifespan Human Resources Patient Experience Committee 	 Targeted interventions to provide equitable care Targeted interventions to improve the quality of care provided 	• N/A
1.2 Provide transportation assistance to medical appointments.	 Utilize the Round Trip rideshare app in the electronic health record Build funding for 	 Increased access to reliable, free or discounted transportation Reduction in cancelled, no-show and missed appointments 	Ride share companies contracted through Round Trip application

1.3 Add navigators/CHWs in key service lines to improve continuity of care and availability.	subsidized transportation in annual department budgets • Financial support for Navigators/Community Health Workers • Participation in state planning efforts to grow and strategically deploy the Community Health Worker workforce	 Improved access to care for patients with limited mobility or challenges with transportation Increase colorectal, breast and cervical cancer screening rates Advance health equity when implemented among populations who often have lower screening rates and/or experience greater health disparities, including people from historically disadvantaged racial and ethnic populations and people with lower incomes Help patients overcome barriers to accessing screening services. Client reminders, reduced structural barriers or improved assistance getting around them, reduced out-of-pocket costs, or a combination of these services Access to one-on-one or group education. Culturally and linguistically appropriate care Improved quality of care Improved patient outcomes 	 Community Health Worker Association of Rhode Island Community Health Worker training programs Rhode Island Certification Board Rhode Island Department of Health Rhode Island Executive Office of Health and Human Services
1.4 Continue offering free skin cancer screenings and add locations to diversify audience.	 Lifespan Community Health Institute Educational materials about skin cancer, translated into multiple languages 	 Free skin cancer prevention and screening service in accessible, community locations Close disparities in skin cancer screening rates by race & ethnicity Increase early diagnosis and treatment of melanomas 	 Partnership to Reduce Cancer in Rhode Island Rhode Island Department of Health Brown Dermatology NBC 10
Continue offering blood pressure and glucose screenings in community settings.	 Lifespan Community Health Institute RIH staff support Educational materials 	 Raise awareness of biometrics to enable patients to self-manage Education to help patients understand the resources and 	Community organizations that host screening events

	about heart disease and diabetes, translated into multiple languages	services available, as well as the benefits of risk factor management • Assistance with referrals to primary care	
1.6 Continue offering influenza vaccination clinics in community settings.	 Lifespan Community Health Institute RIH staff support Educational materials about influenza, translated into multiple languages 	Reduce disparities in influenza vaccination rates by population Education to help patients understand the resources and services available, as well as the benefits of risk factor management Assistance with referrals to primary care	 Rhode Island Department of Health Community organizations that host screening events
1.7 Improve collection of race, ethnicity and language data in LifeChart.	 Lifespan Health Equity Committee RIH staff support 	 Patient demographic data in health records match the patients' self-described demographics Improved data collection for analysis and planning purposes Ability to accurately measure and target racial and ethnic health disparities 	• N/A
1.8 Increase flow and reduce wait times in emergency department.	 RIH staff support Quality and Safety Financial resources 	 Improved patient experience through provision of timely care Reduction in number of patients who leave without being seen Increase referrals to appropriate follow-up care Optimization of emergency department staffing mix 	• N/A
1.9 Improve patient experience by improving communication between providers, patients and caregivers.	Lifespan Patient Experience Committee	 Help patients overcome barriers to accessing screening services. Improved access to care by reducing barriers, improving coordination, and reducing cancellations 	• N/A

Actions Planned for Implementation	Resources Planned to Address Significant Health Need	Anticipated Impact on RIH Community	Outside Groups Collaboration
2.1 Offer Mental Health First Aid in English and Spanish.	 Financial support Facility space Human Resources support to recruit diverse professionals Professional staff support to deliver training Marketing & Communications staff support 	 Reduced stigma associated with mental and behavioral health Increased community support for navigation to mental and behavioral health services Increase in the number of individuals and school staff who can identify, understand and respond to signs of mental illnesses and substance use disorders Increase in the number of individuals and school staff who will reach out and provide initial help and support to someone who may be developing a mental health or substance use problem or experiencing a crisis 	 Johns Hopkins University Rhode Island Department of Education Municipal school districts
2.2 Work with addiction medicine team at RIH on prevention and outreach to reduce racial & ethnic disparities in overdose rates and fatalities.	 Addiction Medicine Division Financial support Facility space Professional staff support 	 Reduced racial and ethnic disparities in overdose rates and fatalities Reduced racial and ethnic disparities in access to and initiation of evidence-based treatments Reduction in overdoses and overdose fatalities 	RIH Opioid COBRE Center
2.3 Focus on improving patient experience scores in psych and psych emergency services.	 Department of Psychiatry Patient Experience Committee 	 Establishment of Patient/Family Advisors Improved patient experience in psych and psych emergency services 	• N/A

		 Improved employee satisfaction in psych and psych emergency services 	
2.4 Offer services to manage addiction disorders among the adult population transitioning out of incarceration.	 Lifespan Transitions Clinic Financial support Facility space Professional staff support 	 High risk population will have greater access to continuous treatment for substance use disorders, resulting in fewer overdoses Appropriate referrals for incarcerated persons who are preparing for community reentry 	 Rhode Island Department of Corrections Center for Health and Justice Transformation
2.5 Facilitate rapid access to treatment for substance misuse through the development of a "bridge" clinic, a low-threshold transitional clinic for the treatment of substance use for patients who are not yet established in outpatient addiction care.	Financial supportFacility spaceProfessional staff support	 Patients will have prompt access to evidence-based treatment for substance use disorders, resulting in increased treatment initiation 	 Governor's Overdose Task Force Opioid Settlement Advisory Committee
Contribute research and policy leadership to statewide initiatives to reduce opioid overdose and fatality rates	 Professional staff support Addiction Medicine Division 	 Help create conditions that facilitate prevention, screening, harm reduction, and treatment for all through equitable strategies Research to understand the mechanisms underlying opioid use disorder and develop innovative solutions 	 RIH Opioid COBRE Center Governor's Overdose Task Force Opioid Settlement Advisory Committee
2.7 Develop family- and community-based strategies for supporting individuals with substance use disorder through harm reduction and removing barriers to care.	Financial supportFacility spaceProfessional staff support	 Increase initiation of and retention in substance misuse treatment programs Reduce overdose and death rates 	 Governor's Overdose Task Force Opioid Settlement Advisory Committee
Significant Health Need #3: Social Determinants of Health			
Actions Planned for Implementation	Resources Planned to Address Significant Health Need	Anticipated Impact on RIH Community	Outside Groups Collaboration
3.1 Expand social needs screening and navigation assistance (e.g. Connect for Health) to serve key service lines including Lifespan Cancer Institute (LCI), Lifespan Cardiovascular Institute (CVI), and Psychiatry.	 Financial support Lifespan Community Health Institute staff support 	 Increased access to community-based services to manage health-related social needs 	 Community organizations that provide services to address social

	Lifespan Information Services	Improved food and nutrition security among patients	determinants of health
3.2 Expand access to employee food bank.	 Care Management department Financial support Facility space 	 Improved food security among employees Improved nutrition security among employees Increased employee engagement, reduction in leaves of absence, reduction in turnover 	• N/A
3.3 Expand access to patient & family food bank.	 Care Management department Financial support Facility space 	 Improved food security among patients Improved nutrition security among patients Improved patient experience 	• N/A
3.4 Offer container gardening education in the Hasbro Children's Hospital garden.	 Hasbro Primary Care providers and staff RIH Development Financial support Facility space 	 Nutrition education for pediatric patients and families Improved pediatric patient experience 	Community garden partners in Providence
3.5 Offer farmer's markets at Hasbro Children's Hospital on a regular schedule.	 Financial support Facility space Department of Nutrition Lifespan Community Health Institute 	 Improved food security among attendees Improved nutrition security among attendees Improved community engagement 	Farm Fresh Rhode Island
3.6 Improve access to food for patients experiencing food insecurity.	 Financial support Department of Nutrition Lifespan Community Health Institute Department of Social Work 	Improved food security among patients Improved nutrition security among patients Improved patient experience Improved patient health outcomes Reduction in readmissions	 Farm Fresh Rhode Island Southside Community Land Trust Meal Delivery Vendors
3.7 Continue to offer food and nutrition programs to patients and residents of the hospital service area.	 Financial support Facility space Department of Nutrition Lifespan Community 	 Improved food security among attendees Improved nutrition security among attendees 	 Farm Fresh Rhode Island Southside Community Land Trust

	Health Institute	Improved community engagement	
3.8 Expand access to medical respite services for patients experiencing homelessness.	 Financial support Department of Social Work and Care Transitions Lifespan Community Health Institute 	 Improved health outcomes among patients experiencing homelessness Reduction in readmissions among patients experiencing homelessness Reduction in length of stay among patients experiencing homelessness 	 Rhode Island Executive Office of Health and Human Services Crossroads Rhode Island
3.9 Assist with transition to community-based service providers to facilitate discharge of long-stay patients.	Financial supportDepartment of Social Work and Care Transitions	Improved patient and family experienceReduction in length of stay	Skilled nursing facilities
3.10 Incorporate SDOH education in GME and in nursing continuing education.	 GME Office Chief Medical Office, Chief Nursing Officer Lifespan Community Health Institute Office of Diversity Equity and Inclusion Financial support 	 Improved measures of equitable care Improved quality of care Improved experience of care Improved provider satisfaction 	 Warren Alpert Medical School at Brown University Rhode Island College University of Rhode Island Salve Regina University Providence College
3.11 Consider offering medically tailored, home meal delivery for patients experiencing food insecurity.	 Financial support Department of Nutrition Lifespan Community Health Institute Department of Social Work and Care Transitions 	 Improved food security among patients Improved nutrition security among patients Improved patient experience Improved patient health outcomes Reduction in readmissions Decreased burden of cardiac/cardiovascular disease, overweight & obesity, and related chronic diseases 	Meal Delivery Vendors

Actions Planned for Implementation	Resources Planned to Address Significant Health Need	Anticipated Impact on RIH Community	Outside Groups Collaboration
4.1 Hire Community Health Workers in key service lines, e.g., pediatrics, LCI, CVI.	Financial support for Navigators/Community Health Workers Human Resources staff support	 Increase cancer and cardiovascular disease screening rates Advance health equity when implemented among populations who often have lower screening rates and/or experience greater health disparities, including people from historically disadvantaged racial and ethnic populations and people with lower incomes Help patients overcome barriers to accessing screening services. Client reminders, reduced structural barriers or improved assistance getting around them, reduced out-of-pocket costs, or a combination of these services Access to one-on-one or group education. Culturally and linguistically appropriate care Improved quality of care Improved patient outcomes 	Community Health Worker Association of Rhode Island
4.2 Build LifeChart functionality to create an alert when qualifying criteria are met for a Community Health referral.	 Information Services staff support Lifespan Community Health Institute 	 Increased access to community-based education, screening and lifestyle change programs 	• N/A
1.3 Improve patient experience by creating and posting FAQs and resources on the lifespan.org site for patients and caregivers to prepare for hospital care and discharge (concierge, turn-down service.	 Professional staff support Marketing & Communications staff support 	Improved adherence with follow-up care Increased patient satisfaction Reduction in no-shows and	• N/A

		cancellations	
4.4 Make Connect for Health Express Sheets available on Patient & Guest Services intranet and through the external lifespan.org site.	Lifespan Community Health Institute Marketing & Communications staff support	 Increased patient access to community-based services to manage health-related social needs Increased provider satisfaction with being able to respond to patients' health-related social needs 	• N/A
4.5 Consider expansion of Connect for Heath to the emergency department setting.	 Lifespan Community Health Institute Financial resources Facility Space 	 Increased access to community-based services to manage health-related social needs Increased provider satisfaction with being able to respond to patients' health-related social needs 	• Unite Us, Inc.
Significant Health Need #5: Community-based Health Education	I		
Actions Planned for Implementation	Resources Planned to Address Significant Health Need	Anticipated Impact on RIH Community	Outside Groups Collaboration
5.1 Offer conferences, workshops and presentations on topics requested by community partners.	 Financial support Professional staff support to deliver training Lifespan Community Health Institute Marketing & Communications staff support RIH subject matter experts 	 Access to group education and peer support in virtual format and live events Increased referrals to and utilization of health maintenance programs Increased health literacy among attendees Education to help participants understand available resources and services, as well as the benefits of risk factor management Assistance with referrals to primary care 	 Organizations that help promote the lecture series Community organizations that host events Community organizations that deliver education Non-RIH subject matter experts

5.2 Offer community-based Hands-only CPR classes for underserved, elderly, and secondary students who may be in a life-saving situation.	 Financial support Facility space Professional staff support AHA certified CPR instructors Lifespan Community Health Institute – AHA Community Training Center 	 Access to group education and peer support in familiar and accessible settings Skill-building for long-lasting intervention Increase in application of life- saving cardiopulmonary resuscitation 	Community organizations that host and help promote the programming
5.3 Offer Stop the Bleed first aid education that could be partnered with CPR classes	Financial supportFacility spaceProfessional staff support	 Access to group education and peer support in familiar and accessible settings Skill-building for long-lasting intervention 	Community organizations that host and help promote the classes
5.4 Deliver community education on Stroke, Opioid, Narcan, Adderall Education, Gun Violence Prevention, Driving Safety, and Sexual Assault Prevention.	Financial support Lifespan Community Health Institute staff support RIH subject matter experts	 Access to one-on-one or group education Culturally and linguistically appropriate care Education to help patients understand the resources and services available, as well as the benefits of risk factor management Assistance with referrals to primary care Skill-building for long-lasting behavior change Improved health outcomes from adoption of health-promoting behaviors 	Non-RIH subject matter experts Community organizations that host and help promote the classes
5.5 Offer reproductive health education for middle and high school students.	 Financial support Lifespan Community Health Institute RIH subject matter experts 	 Improved reproductive health outcomes for participants Increased rates of family planning Lower rates of teen pregnancy 	 Municipal school districts Community organizations that host and help promote the classes

5.6 Work with Psychiatry to leverage connections to community-based, family, and patient supports.	 Department of Psychiatry Department of Social Work 	 Improved access to community-based mental health peer supports Reduced burden of stress among caregivers and family members of patients with mental health diagnoses 	 Community-based mental and behavioral health providers Certified Community Behavioral Health Centers Unite Us, Inc.
5.7 Offer the Get Up and Move physical activity program.	 Financial support Lifespan Community Health Institute RIH Provider Champions 	 Increased frequency and duration of physical activity among participants Reduced risk of cardiovascular and chronic diseases among participants 	Community organizations that host and help promote activities
5.8 Continue to offer the Diabetes Prevention Program and become a Medicare DPP supplier.	 Financial support Facility space Professional staff support DPP certified coaches 	 Access to group education and peer support in familiar and accessible settings Skill-building for long-lasting behavior change Improved health outcomes from adoption of health- promoting behaviors Prevention of Type II Diabetes 	Community organizations that host and help promote the classes
5.9 Provide Tar Wars programming for youth across service area.	 Financial support Facility space Professional staff support 	 Access to group education and peer support in familiar and accessible settings Skill-building for long-lasting behavior change Reduced initiation of tobacco products among youth 	 Community organizations that host and help promote the programming American Academy of Family Physicians
5.10 Provide Safe Sitter programming for youth across service area.	 Financial support Facility space Safe Sitter certified instructors Professional staff support 	 Access to group education and peer support in familiar and accessible settings Skill-building for long-lasting behavior change Prevention of unintentional injuries among children 	Community organizations that host and help promote the classes
5.11 Continue to offer a monthly health ambassador lecture series for the general public.	Financial supportProfessional staff supportRIH subject matter	Access to group education and peer support in virtual format	Community organizations that help promote the lecture

	experts	 Increased referrals to and utilization of health maintenance programs Increased health literacy among lecture attendees 	series • Non-RIH subject matter experts
Significant Health Need #6: Chronic Disease Management			
Actions Planned for Implementation	Resources Planned to Address Significant Health Need	Anticipated Impact on RIH Community	Outside Groups Collaboration
6.1 Offer annual breast, cervical, lung, and prostate cancer screening for uninsured and low-income residents.	 Lifespan Cancer Institute Lifespan Community Health Institute Financial support Facility space Physician, nursing and professional staff support 	 Cancer prevention education, screening, and linkage to appropriate follow-up care Increase in early detection and entry into treatment Reduced racial and ethnic disparities in cancer staging at initiation of treatment 	 Community organizations that help promote the events Rhode Island Department of Health
6.2 Facilitate referrals from primary care practices within Lifespan to the Lifespan Cancer Institute.	 Lifespan Cancer Institute Physician, nursing and professional staff support 	 Cancer prevention education, screening, and linkage to treatment Increase in early detection and entry into treatment Reduced racial and ethnic disparities in cancer staging at initiation of treatment 	Coastal Medical Physicians, Inc.
6.3 Open a cardiac care center and cardiac lab at RIH in order to serve more patients.	 Cardiovascular Institute Financial support Facility space Physician, nursing and professional staff 	 Heart disease prevention education, screening, and linkage to treatment Increased access to comprehensive cardiac care in the service area 	• N/A
6.4 In partnership with HopeHealth, integrate palliative care early in the care of patients.	 Financial support Facility space Cardiovascular Institute Physician, nursing and professional staff 	 Improved pain and disease management among patients Improved patient experience 	• HopeHealth
6.5 Incorporate telehealth and telemonitoring in cardiac rehabilitation to drive patient & family self-efficacy.	 Financial support Cardiovascular Institute Lifespan Information Services 	 Improved patient disease self-management Improved patients' access to care and provider feedback 	• N/A

		Improved patient experience	
6.6 Provide multidisciplinary supports and increase utilization of the palliative care nurse, psychologist, and social worker in the advanced heart failure clinic.	 Financial support Facility space Physician, nursing and professional staff Cardiovascular Institute Lifespan Pharmacy Department of Social Work 	 Improved continuity of care through better coordination of services and communication with internal and external multidisciplinary teams Improved patient education to better support their transition from one care setting to the next Improved patient experience Improved cardiac health outcomes 	 HopeHealth Visiting Nurse Services
6.7 Assess SDOH among patients in the Heart Failure Clinic and consider the provision of medically tailored meals to food insecure patients.	 Financial support Cardiovascular Institute Lifespan Community Health Institute Lifespan Information Services 	 Increased access to community-based services to manage health-related social needs Improved food and nutrition security among patients Improved quality of care in the ambulatory setting 	Community organizations that provide services to address social determinants of health
6.8 Launch smoking cessation and weight loss programs at cardiac rehab.	 Financial support Facility space Cardiovascular Institute Physician, nursing and professional staff support 	 Skill-building for long-lasting behavior change Improved health outcomes from adoption of health-promoting behaviors Decreased incidence of cardiac/cardiovascular disease, overweight & obesity, and related chronic diseases 	Smoking cessation and weight loss programs vendors
6.9 Partner with Coastal Medical to facilitate referrals between primary care and cardiology.	 Physician, nursing and professional staff support Cardiovascular Institute Lifespan Information Services 	 Improve patient access to cardiology services, patient experience and health outcomes Reach a wider population of eligible candidates with cardiac disease, resulting in 	Coastal Medical

improved clinical and psychosocial outcomes and	
positive impact on morbidity and mortality	

Conclusion

This Rhode Island Hospital Implementation Strategy report was authorized and approved by Rhode Island Hospital Board of Trustees on March 14, 2023.

RIH will document progress on the implementation strategies presented as part of its commitment to the community it serves each year in its Form 990 tax return filings as required by the IRS. RIH appreciates the continued support of its partners, recognized below, which help it meet the health care needs of Rhode Islanders. Questions or comments on the RIH CHNA or Implementation Plan may be submitted to:

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