Mount Sinai Beth Israel Hospital
CHNA Implementation Strategy

Adopted by Mount Sinai Beth Israel Hospital Governing Board on: May 15, 2018

The Mount Sinai Beth Israel Hospital (MSBI) is comprised of two campuses, Mount Sinai Beth Israel in Manhattan (MSBI – Manhattan) and Mount Sinai Brooklyn in Brooklyn (MS – Brooklyn). This document outlines the MSBI Implementation Strategy for improving the health of the population in the community they serve by addressing priorities identified through the Community Health Needs Assessment (CHNA).

The CHNA and Implementation Strategy were undertaken to better understand and address community health needs and to fulfill the requirements of the Internal Revenue Service (IRS) regulations, pursuant to the Patient Protection and Affordable Care Act of 2010.

The hospital may amend the Implementation Strategy as circumstances warrant. For example, certain needs may become more pronounced and merit enhancements to the described strategic initiatives. Alternatively, other organizations in the community may decide to address certain community health needs included in the plan. The full CHNA is available at www.mountsinai.org/about-us/community.

The document contains the following information:

1. About MSBI
2. Definition of the Community Served
3. Summary of Significant Community Health Needs
4. Implementation Strategy to Address Significant Health Needs
5. Significant Health Needs MSBI Will Not Address Directly
6. Implementation Strategy Adoption
1. About MSBI

MSBI is an affiliate of Mount Sinai Health System - a nationally recognized, not-for-profit charitable health care organization located in New York City. Founded in 1889, MSBI is comprised of two campuses, MSBI in Manhattan, a 701-bed, teaching facility on Manhattan’s Lower East Side, and Mount Sinai Brooklyn, a 212-bed acute-care community hospital located in Midwood. To enhance clarity, the acronyms below are used throughout this document:

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSBI - Manhattan</td>
<td>Mount Sinai Beth Israel, the campus in Manhattan</td>
</tr>
<tr>
<td>MS - Brooklyn</td>
<td>Mount Sinai Brooklyn, the campus in Brooklyn</td>
</tr>
<tr>
<td>MSBI</td>
<td>Mount Sinai Beth Israel Hospital, the hospital facility with campuses in Manhattan and Brooklyn</td>
</tr>
</tbody>
</table>

The Mount Sinai Heath System is undertaking a sweeping transformation of MSBI-Manhattan. This transformation is creating the new Mount Sinai Downtown network, an expanded and unified network of state-of-the-art facilities stretching from the East River to the Hudson River below 34th Street.

In addition to a new hospital facility building, the transformation will also create a network of greatly expanded primary, specialty, urgent, behavioral and outpatient surgery services. The goal is to keep people healthy, to reduce inpatient hospitalizations, and to bring services closer to where patients live and work. Specific elements are as follows:

- A brand new MSBI-Manhattan and state-of-the-art Emergency Department on 14th Street and Second Avenue;
- Three major sites performing surgeries with over 35 operating and procedure rooms;
- Major expansion of walk-in services, including primary and specialty care;
- An extensive network of 16 physician practice locations with over 600 physicians; and
- Enhanced behavioral health services.

MSBI-Manhattan will continue to be open and welcome patients for services throughout this transformation, which is expected to take about four years. Some services will be relocated within the Mount Sinai Downtown network, except for the most complex cases and delivery of babies, which will be cared for in other hospitals in the Mount Sinai Health System.
MSBI shares the mission, vision, brand promise, and brand positioning of the Mount Sinai Health System, which are below.

- **Mission.** The mission of the Mount Sinai Health System is to provide compassionate patient care with seamless coordination and to advance medicine through unrivaled education, research, and outreach in the many diverse communities we serve.

- **Vision.** The Mount Sinai Health System’s vision is to continue to grow and challenge convention through our pioneering spirit, scientific advancements, forward-thinking leadership, and collaborative approach to providing exceptional patient care in the many unique communities we serve.

- **Brand Promise.** Mount Sinai is the choice for groundbreaking and compassionate health care. Our unrivaled education, translational research, and collaborative clinical leadership ensure that we deliver the best patient care—from prevention to treatment of the most serious and complex human diseases.

- **Brand Positioning.** At Mount Sinai, we reimagine what is possible and redefine the practice of modern medicine, both in our local community and across the world, in order to produce the only result that really matters: radically better outcomes for our patients.

Additional information about Mount Sinai Beth Israel Hospital and its services is available at [http://www.mountsinai.org](http://www.mountsinai.org).
2. Definition of the Community Served

For the purposes of the MSBI CHNA, the community was defined as 40 ZIP Codes encompassing sections of both the boroughs of Brooklyn and Manhattan. The community is divided into neighborhoods utilized by the New York State Department of Health; 10 of the 42 neighborhoods in New York City are in the MSBI community.

The community is mapped below. In 2016, 60 percent of the hospital’s inpatient discharges originated from this area.

In 2015, the community was estimated to have a population of 1,763,670 persons.
3. Summary of Significant Community Health Needs

The 2017 MSBI CHNA identified a number of significant health needs in the community. The CHNA process considered and assessed a wide range of primary and secondary data sources including structured interviews with persons who represent the broad interests of the community and those with expertise in public health, and assessments and studies prepared by other organizations. The CHNA report identified eleven health needs as significant in the community, as listed below in alphabetical order.

<table>
<thead>
<tr>
<th>Significant Community Health Needs Identified in the 2017 CHNA</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Aging Population</td>
</tr>
<tr>
<td>• Access to Mental Health Care and Poor Mental Health Status</td>
</tr>
<tr>
<td>• Access to Primary Health Care Services by Individuals with Limited Resources</td>
</tr>
<tr>
<td>• Chronic Diseases and Contributing Lifestyle Factors</td>
</tr>
<tr>
<td>• Environmental Determinants of Health</td>
</tr>
<tr>
<td>• Homelessness</td>
</tr>
<tr>
<td>• Navigating a Changing Health Care Provider Environment</td>
</tr>
<tr>
<td>• Poverty, Financial Hardship, and Basic Needs Insecurity</td>
</tr>
<tr>
<td>• Safe and Affordable Housing</td>
</tr>
<tr>
<td>• Socio-Economic, Racial, Cultural, Ethnic, and Linguistic Barriers to Care</td>
</tr>
<tr>
<td>• Substance Abuse</td>
</tr>
</tbody>
</table>
4. Implementation Strategy to Address Significant Health Needs

MSBI has a proud tradition of serving the community and providing significant resources towards community benefit activities. Over the next three years, the hospital plans to continue this commitment to meet health needs in the community. To develop the planned response to significant community health needs identified in the 2017 CHNA, the hospital reviewed the CHNA findings and applied the following criteria to determine the most appropriate needs for the hospital to address:

- The extent to which the hospital has resources to address the need;
- The extent to which the hospital has expertise or competencies to address the need;
- The priority assigned to the need;
- The availability of effective interventions that address the need; and
- The extent to which other hospital facilities and/or community organizations are addressing the issue.

By applying these criteria, the hospital selected the following significant needs to focus its efforts during the 2018-2020 time period:

- Access to Mental Health Care and Poor Mental Health Status,
- Access to Primary Health Care Services by Individuals with Limited Resources,
- Chronic Diseases and Contributing Lifestyle Factors,
- Socio-Economic, Racial, Cultural, Ethnic, and Linguistic Barriers to Care, and
- Substance Abuse.

Discussion of these focused efforts is below. Included in the discussion is the following:

I. Actions MSBI intends to take, including programs and resources it plans to commit;
II. Anticipated impact of these actions and a plan to evaluate that impact;
III. Planned collaborations between the hospital and other organizations; and
IV. Planned commitments of resources.
I. Actions MSBI intends to take, including programs and resources it plans to commit

Many intended activities of MSBI are expected to impact multiple needs identified in the CHNA. These activities are as described below.

**Health professions education**
The health professions education activities of MSBI respond to both the current and future community health needs for chronic disease treatment and prevention. MSBI actively participates in over two dozen residency and fellowship programs.

**Participation in Medicaid**
Medicaid provides health coverage to low-income individuals through federal and state funding. MSBI participation in New York State Medicaid includes inpatient and outpatient services. In 2016, the payments for services provided to Medicaid patients were approximately 80 percent of the cost to provide these services.

**Community health improvement activities**
MSBI supports numerous activities to improve community health through grants and in-kind contributions. These activities include the following:

- Providing material resources for community programs;
- Community affairs programming;
- Funding of grants and research;
- Patient transportation, education, and welfare; and
- Assistance with applications for Medicaid and other programs.

**Subsidized Health Services**
MSBI hospital provides numerous inpatient and outpatient service lines that operate as losses. MSBI continues to provide these services because the health of community members would diminish because other providers would be unlikely to provide these services. Subsidized health services provided by MSBI include physician and emergency department services.

**Health Care Services**
A full-range of health care services is available at the hospital campuses, outpatient facilities, and physician practices throughout the community. As part of the Mount Sinai Health System, integrated resources such as electronic health records facilitate the referral of patients to needed services provided by other Mount Sinai Health System hospitals and health professionals.

Mount Sinai also maintains clinical affiliation agreements with City MD and CVS Minute Clinics. Specialty care services can be accessed through affiliations with other organizations, including other Mount Sinai hospitals.

**Department of Spiritual Care and Education**
The Department of Spiritual Care and Education is staffed by chaplains who provide emotional, spiritual, and religious support to patients in inpatient and outpatient settings, working in partnership with interdisciplinary teams. MSBI hosts a Clinical Pastoral Education program,
through which chaplain residents, interns, and externs are trained in spiritual care skills. The Department of Spiritual Care and Education hosts quarterly breakfasts for local clergy to strengthen relationships between the hospital and houses of worship and to provide clergy with educational programming and resources to meet their congregants’ health needs.

A. Access to Mental Health Care and Poor Mental Health Status

The 2017 MSBI CHNA found that the mental health status is poor for many residents because of day-to-day pressures, substance abuse, and psychiatric disorders. The supply of mental health providers is insufficient to meet the demand for mental health services.

Planned activities to increase access to mental health care and improve the mental health status of community residents are described below. These activities are in addition to the MSBI activities that impact multiple needs.

Health professions education
The health professions education activities of MSBI respond to both the current and future community health needs for mental health services. MSBI actively participates in over two dozen residency and fellowship programs. Current residency and fellowship programs that are especially related to mental health care services are as follows:

- Clinical Psychology Internship Program
- Geriatric Psychiatry Fellowship
- Psychiatry Residency

Mental Health Services
Mental health care services are available at the hospital campuses, outpatient facilities, and physician practices throughout the community. As part of the Mount Sinai Health System, integrated resources such as electronic health records facilitate the referral of patients to needed services provided by other Mount Sinai Health System hospitals and health professionals. Specific mental health services available include the following:

- **Mount Sinai’s Department of Psychiatry and Behavioral Sciences.** The Department of Psychiatry and Behavioral Sciences at Mount Sinai Beth Israel provides comprehensive inpatient, emergency, and outpatient services. Specific programs, centers, and services of the Department include the following:
  
  - Outpatient mental health clinic services
  - Assertive Community Treatment Team (ACT)
  - Mobile Crisis Services
  - Addiction Institute of Mount Sinai at Beth Israel (AIMS-BI):
    - Outpatient Chemical Dependence Clinic/Rehab
    - Ambulatory Detoxification
    - Opioid Treatment Programs
    - Inpatient detoxification and rehabilitation services
- Integrated Behavioral Health and Primary Care services
- Comprehensive Psychiatric Emergency Service (CPEP)
- Inpatient Psychiatric services

**Outpatient behavioral health services.** The MSBI outpatient mental health services unit provides comprehensive, whole health care. It includes a broad spectrum of clinical services including comprehensive psychiatric evaluations, medication management, individual and family psychotherapy, and group psychotherapy. It also runs one of the state-approved ACT teams, providing intensive community-based treatment for people with the most severe mental illnesses.

AIMS-BI represents the clinical, educational, and research services and programs to treat people with substance use disorders, develop new treatments and gain better understanding of the mechanisms of disease, and to train the next generation of clinicians to care for people with substance use disorders. The clinical services encompass inpatient to outpatient levels of care, including the Opioid Treatment Programs.

In addition, behavioral health services are provided within primary care, as well as primary care and specialty care services within behavioral health services. The focus is on assessing and managing all conditions, whether the conditions are behavioral health related or physical health related, and developing strong collaborations and partnerships with physical health and community based providers.

**Inpatient and Emergency behavioral health services.** MSBI provides inpatient psychiatric services for people with acute psychiatric illness, focusing on the resolution of acute symptoms and developing a safe plan for return to the home and community upon crisis stabilization. Treatment consists of a wide range of somatic and psychosocial therapies, with a strong multidisciplinary approach. MSBI also provides emergency evaluation services in the CPEP for adults and adolescents. The Mobile Crisis Team is a community-based team of licensed professionals who respond to referrals for urgent crises in the community. The team provides crisis assessment as well as short-term transitional services to ensure that there is connectivity to outpatient and/or community based services.

As part of AIMS-BI, inpatient detoxification and rehabilitation services are also provided. The inpatient unit serves as an acute and intensive initial step to safely manage withdrawal symptoms, then subsequent intensive counseling and therapy to begin the road to recovery from substance use.
B. Access to Primary Health Care Services by Individuals with Limited Resources

The 2017 MSBI CHNA found that New York City has a robust health provider network. However, access to this network can be limited to individuals with limited financial resources, including lack of health insurance and relatively high deductibles / co-pays.

Planned activities to increase access to primary health care for individuals with limited resources are described below. These activities are in addition to the MSBI activities that impact multiple needs.

Health professions education
The health professions education activities of MSBI respond to both the current and future community health needs for primary health care services. MSBI actively participates in over two dozen residency and fellowship programs. Residency and fellowship programs that are especially related to primary health care services are as follows:

- Emergency Medicine Residency
- Internal Medicine Residency

Primary Care Services
MSBI provides significant specialty care services for both inpatient and outpatient services, including but not limited to breast health, cardiology, diabetes services, gastroenterology, general surgery, and orthopedics. The hospital provides primary care at its campuses, as well as physician practices throughout Manhattan and Brooklyn, and maintains affiliation agreements with City MD and CVS Minute Clinics. The hospital, together with The Mount Sinai Health System, is a leader in providing quality health care to its patients regardless of their ability to pay. Specific community service programs include the following:

- Mount Sinai Chelsea - Mount Sinai Chelsea specializes in diagnosing and treating women who have breast or gynecological cancer. Men who need minor outpatient surgery or infusion therapy are also treated. Services include cancer diagnosis and treatment
- Mount Sinai Union Square - Mount Sinai Union Square provides specialty and primary care, diagnostic services, labs, and a pharmacy. Mount Sinai Union Square also provides urgent care in a facility that is open 365 days a year.
- Mount Sinai Doctors, 309 West 23rd Street - Mount Sinai Doctors West 23rd Street provides comprehensive primary and specialty services, appointments in advance, and accepts walk-ins. In addition to accepting a multitude of insurance plans, a self-pay option is available.
- Mount Sinai Doctors, 55 East 34th Street - Mount Sinai Doctors East 34th Street provides a range of multi-specialty services. Specific services include cardiology; dermatology; diabetes education; ear, nose, and throat; gastroenterology; gynecology; internal medicine; immigration physicals; ophthalmology; orthopedics; otolaryngology; pain management; podiatry; radiology; and urology. In addition to accepting a multitude of insurance plans, a self-pay option is available.
Mount Sinai Doctors Stuyvesant Town - Mount Sinai Doctors Stuyvesant Town offers personalized treatment for temporary and chronic medical conditions in Manhattan’s East Village neighborhood, located near the Union Square subway stop. The offices feature state-of-the-art exam rooms and imaging facilities, and is staffed by experienced Mount Sinai physicians. Specific services include routine health care and checkups, as well as urgent care, immunizations, nutritional screening, physicals, and orthopedic services. In addition to accepting a multitude of insurance plans, a self-pay option is available.

Mount Sinai Doctors, 226 West 14th Street - Mount Sinai Doctors West 14th Street is a multi-specialty practice located where Chelsea meets the West Village. Extended hours are provided on evenings and weekends. The office has been designated a Center of Excellence by the Human Rights Campaign, which highlights the commitment to the health care needs of the LGBT community. Specific services provided include primary care, allergy evaluation and treatment, treatment of endocrine systems, and management of cardiology issues. In addition to accepting a multitude of insurance plans, a self-pay option is available.

C. Chronic Diseases and Contributing Lifestyle Factors

The 2017 MSBI CHNA found that chronic diseases in the community include obesity, diabetes, hypertension, heart disease, strokes, and asthma. Contributing lifestyle factors might also include sexually transmitted infections.

Planned activities to help reduce the incidence of and manage current chronic disease, including increasing healthy life factors, are described below. These activities are in addition to the MSBI activities that impact multiple needs.

Health professions education

The health professions education activities of MSBI respond to both the current and future community health needs for chronic disease treatment and prevention. MSBI actively participates in over two dozen residency and fellowship programs. Current residency and fellowship programs that are especially related to chronic disease services are as follows:

- Breast Imaging Fellowship;
- Breast Surgery Fellowship;
- Cardiology Fellowship;
- Diagnostic Radiology Residency;
- Endocrinology and Diabetes Fellowship;
- Gastroenterology Fellowship;
- Hand Surgery Fellowship;
- Hematology and Medical Oncology Fellowship - Beth Israel;
- Infectious Diseases Fellowship;
- Interventional Cardiology;
- Interventional Endoscopy Fellowship;
- Micrographic Surgery and Dermatologic Oncology Fellowship;
- Movement Disorders Fellowship;
Mount Sinai Beth Israel Hospital

Managing Chronic Disease through Primary Health Care Services

The hospital provides primary care at its campuses, as well as physician practices throughout Manhattan. The hospital, together with The Mount Sinai Health System, is a leader in providing quality health care to its patients regardless of their ability to pay. Specific chronic disease services include ones listed below.

- **Diabetes treatment.** The Mount Sinai Clinical Diabetes Institute provides highly specialized care for people with diabetes and related conditions. The Institute’s network includes diabetes physicians, clinical diabetes educators, and allied specialists. The Institute works to prevent and manage diabetes, as well as complications from diabetes. Specific programs include the following:

  - Self-management classes provided by the Clinical Diabetes Institute include free diabetes education classes for both type 1 and type 2 diabetes. Multicultural and multilingual certified diabetes instructors teach the classes. The curriculum helps individuals learn how to control diabetes and prevent complications. The type 1 class reviews carbohydrate counting, insulin dosing, insulin to carbohydrate ratios, correction factors, dosing basal/long acting insulin, effects of exercise on blood sugars, and many other topics. The type 2 diabetes classes review a variety of topics including hypoglycemic protocol, general healthy eating, stress and relaxation tips, and medications/insulins used for glycemic control.
  - Nutrition Counseling is provided. The Institute’s registered dietician teaches diabetes self-management and provides medical nutrition therapy. Dietary recommendations are based on the latest guidelines and tailored to other medical conditions, cultural food preferences, and personal circumstances.
  - In-Office Hemoglobin A1C Testing provides an estimate of an individual’s average blood sugar level over the last three months. Using novel technology, the A1C level is provided within six minutes from a drop of blood.
  - Insulin Pump Therapy management allows for particular fine-tuning of an individual treatment regimen and eliminates the need for insulin injections.
  - Continuous Glucose Monitoring (CGM) uses under-the-skin sensors to measure glucose levels continuously, 24 hours a day. CGM provides information about how medication, food, and exercise are affecting your blood glucose levels, which allows for adjustments in the treatment regime.
  - Diabetes Prevention Program/Viva Fitness is a program with the YMCA of Greater New York that is targeted to adults who are at risk for diabetes or who
have a diagnosis of prediabetes. This program is designed to reduce the risk for type 2 diabetes through education and motivation.

- The High-Risk Ob/Gyn Program provides diabetes education to pregnant women with diabetes and is provided by obstetrics/gynecology departments throughout the Mount Sinai Health System.

### HIV Treatment

- HIV Treatment. The Mount Sinai Comprehensive Health Program-Downtown (MSCHP-Downtown) offers full service, quality health care to the HIV-positive residents of lower Manhattan. Formerly affiliated with Saint Vincent’s Hospital, and now in combination with Mount Sinai’s Jack Martin Clinic on the Upper East Side, MSCHP-Downtown is one the largest HIV programs in the country.

### Renal Treatment

- Renal Treatment. Mount Sinai Renal Services provides treatment of kidney diseases and is one of largest, most comprehensive kidney disease treatment, research, and education centers in the world. The Division of Nephrology at Mount Sinai provides comprehensive evaluation and treatment programs for all types of adult and pediatric kidney diseases and disorders.

### Peter Krueger Center for Immunological Disorders

- Peter Krueger Center for Immunological Disorders. The Peter Krueger Clinic (PKC) provides comprehensive outpatient care. PKC patients work with a primary care team that includes an HIV Specialist (a physician or physician assistant) and a registered nurse, who are actively involved in managing patient care. Each patient’s primary provider serves as team leader and coordinates all routine medical care including exams, lab tests, medical imaging, and referrals to on-site specialty services such as gynecology, dermatology, dentistry, and pain management. The primary provider is also concerned about emotional and lifestyle factors, such as stress, diet, substance use, or high-risk sexual behavior, which may affect health.

### Support Groups

Caring experts lead a wide range of support groups for patients and help families handle medical challenges. For example, support groups include ones for Parkinson’s disease, Dystonia, Deep Brain Stimulation, Ataxia Support, and Essential Tremors.

### D. Socio-Economic, Racial, Cultural, Ethnic, and Linguistic Barriers to Care

The 2017 MSBI CHNA found that access to care may be limited for residents who do not feel welcomed by providers. Insufficient cultural competence and language limitations are barriers to foreign-born residents. For some U.S.-born residents, barriers may be influenced by real or perceived differences in services based on race, ethnicity, socioeconomic background, sexual orientation, and/or other issues. LGBTQ residents may be especially likely to perceive and/or experience access barriers.

Planned activities to help reduce barriers to care are described below. These activities are in addition to the MSBI activities that impact multiple needs.
• **Patient Representatives.** At MSBI, patient representatives are available to assist patients and family members with medical progress and guidance toward a speedy recovery and discharge. Patient representatives facilitate contact and communication with health care providers and the many service departments in the Health System. Assistance can include help with questions about patients' rights and Health Care Proxy forms, acting as liaison to the Ethics Committee, and a resource for any problems. Assistance can also include expediting transportation, assisting with billing complaints, arranging for interpreter/translation services, and medical form facilitation including all Health Care Proxies.

• **LGBT Services.** The Mount Sinai Health System is dedicated to meeting the health care needs of the lesbian, gay, bisexual, and transgender (LGBT) community. In addition to medical and educational services, Mount Sinai Beth Israel Hospital and the Mount Sinai Health System take an active role in promoting LGBT health equity and access to care, and join with other organizations committed to addressing the needs of the LGBT community. LGBT services at MSBI and/or other Mount Sinai locations include extensive counseling and mental health support via transgender confirming resources.

• **Asian Services.** The health needs of the Asian American community are honored with easy and seamless access to high quality inpatient and outpatient care as well as support services. Asian-American patients admitted to the hospital will find an environment that honors culture, traditions, and language with Asian physicians specializing in hospital medicine, experienced multi-lingual medical interpreters, a dedicated social worker, free newspapers, and multi-lingual signs. Additionally, efforts are made to recruit multi-lingual employees and provide training to non-Asian staff to enhance employee understanding of the culture and family dynamics of the Asian-American community.

• **Jewish Services.** The goal of the Heritage Initiative is to promote cultural sensitivity to the Jewish community at all Beth Israel inpatient and outpatient sites. Specific services of the Heritage initiative include helping patients connect with organizations that serve the Jewish community, providing resources to help patients and their families during Shabbos, furnishing space for religious services, offering genetic counseling and testing, and serving kosher meals.

• **Center for Transgender Medicine and Surgery.** The Mount Sinai Center for Transgender Medicine and Surgery (CTMS) delivers advanced care for trans and gender non-conforming people. The CTMS team is a comprehensive group of providers who have expertise in primary care, hormone therapy, behavioral health support, gender-affirming surgeries, and other supportive services. Thus, patients at CTMS can receive primary care, as well as see specialists in the areas of endocrinology, behavioral health, plastic surgery, urology, gynecology, and more.
E. Substance Abuse

The 2017 MSBI CHNA found that substance abuse in the community includes alcohol and multiple illegal substances. Alcohol abuse is evidenced by binge drinking in local bars and opioid abuse disproportionately impacts homeless individuals.

Planned activities to help manage and reduce substance abuse are described below. These activities are in addition to the MSBI activities that impact multiple needs.

Substance Abuse Services

Substance abuse services are available at the hospital campuses, outpatient facilities, and physician practices throughout the community. As part of the Mount Sinai Health System, integrated resources such as electronic health records facilitate the referral of patients to needed services provided by other Mount Sinai hospital and health professionals. Specific substance abuse services available include ones listed below.

- **Chemical dependency.** Chemical dependency is a serious illness with debilitating symptoms. A chemically dependent person has lost the ability to willingly stop drinking, or taking a particular mood-altering drug despite the consequences it causes on their life. Specific community service programs include ones listed below.
  
  - The Chemical Dependency Services at the Addiction Institute at MSBI provides services to help the chemically dependent person regain stability. As this program is located in a hospital (Mount Sinai Beth Israel’s Bernstein Pavilion), a wide range of services are available within the same vicinity. An interdisciplinary team is skilled in working with and treating addiction. This team includes social workers, addiction and substance abuse counselors, physicians, physician assistants and registered nurses.
  
  - Detoxification (Detox) Services at the Addiction Institute at Mount Sinai are treatments for acute withdrawal that require immediate attention. Treatment includes engagement, assessment, motivation, and referral. Detox is the first step to long-term treatment. Specialized detox services to pregnant women are provided.
  
  - Inpatient rehabilitation (inpatient rehab), an intensive treatment modality that provides patients with a 24/7 structured therapeutic setting, is provided. Inpatient rehab is generally the first step in the recovery process after detox. Patients participating in the inpatient program are put on a routine that includes teaching them how to experience life without drugs or alcohol.
  
  - Outpatient programs are provided as not all individuals require the intensity of inpatient services. Specific outpatient services include evaluation, ambulatory detoxification; outpatient day and evening services; DWI screening, assessment, and referral; brief therapy; and psychiatric services.
  
  - The Opioid Treatment Program is a comprehensive treatment program for individuals with an opioid addiction. A full range of services are available, including methadone treatment, buprenorphine treatment, counseling, case management, group treatment, educational and vocational counseling, annual
physicals, general medical care, art therapy, psychiatric evaluation and medication management, and HIV counseling and testing. Opioid treatment reduces the incidence of HIV and other infectious diseases, dramatically decreases criminal behavior, and significantly improves the lives of those engaged in treatment.

Note: As part of the Mount Sinai Health System, integrated resources help MSBI refer patients to effective primary and specialized care services provided by other hospital facilities and Mount Sinai health professionals. For example, patients in need of addiction treatment can be referred to the doctors training with the Addiction Psychiatry Fellowship program at Mount Sinai St. Luke’s – Mount Sinai West.

II. Anticipated impact of these actions and a plan to evaluate that impact

The anticipated impact of activities is improved mental and physical health of community residents.

Reviews of individual activities are ongoing and an inclusion of an evaluation is anticipated in the next CHNA. Metrics used to assess activities could include frequency measures, such as the number of services provided. While it is hoped that the intended impact will improve community health, identifying valid outcomes-based impact measures is difficult for multiple reasons, including lags in data collection, analysis, and reporting of community health indicators by independent measures of changes. Adding to the difficulty in measuring outcomes-based impact includes the size of the community population, changes in the population through in-migration and out-migration, and changes in the overall environment. Furthermore, assessing the causal impact of any correlation between this activity and outcome measures may not be possible.

Each health professions education activity is also evaluated individually. Evaluation criteria include interest from prospective students, participation by individual practicing professionals, and assessments by accrediting agencies.

III. Planned collaborations between the hospital and other organizations

Activities are provided through partnerships and collaborative contributions from numerous community entities and members. Collaborating partners include the following:

- Mount Sinai’s Icahn School of Medicine
- Individual practicing professionals
- Local religious leaders

Health professions education involves numerous entities including educational institutions (such as schools, colleges, and universities), accrediting organizations (such as the Liaison Committee on Medical Education, the Accreditation Council for Graduate Medical Education, the Council on Podiatric Medical Education, the Accreditation Council for Pharmacy Education, and the Accreditation Commission For Education in Nursing), and individual practicing professionals.
IV. Planned commitments of resources

Planned commitments of resources include direct support for many activities, such as Health Professions Education, Community Health Improvement Activities, and Subsidized Health Services. Planned commitments of resources also include indirect and in-kind support, such as financial shortfalls for providing services to Medicaid enrollees and use of facilities by individuals attending support groups.

5. Significant Health Needs that Will Not Be Addressed (Directly)

MSBI is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. However, no entity can address all of the health needs present in its community.

Reasons for not addressing a need include ones identified by the IRS:

- Resource constraints,
- Relative lack of expertise or competencies to effectively address the need,
- A relatively low priority assigned to the need,
- A lack of identified effective interventions to address the need, and/or
- The fact that the need is being addressed by other facilities or organizations in the community.

The hospital evaluated the significant needs identified in the CHNA based on the IRS criteria. Based on these criteria, the hospital identified significant needs that it will not address with direct interventions, although planned interventions in the 2018-2020 time period may have indirect impact. These significant needs, discussed below, are as follows:

A. Aging Population
B. Environmental Determinants of Health
C. Homelessness
D. Navigating a Changing Health Care Provider Environment
E. Poverty, Financial Hardship, and Basic Needs Insecurity
F. Safe and Affordable Housing
A. Aging Population

The CHNA found that the population is aging and “aging in place,” which will increase needed support for healthcare, housing, transportation, and nutrition assistance. MSBI, together with the Mount Sinai Health System, has expertise and resources related to medical services. However, a lack of core competencies in housing, transportation, and nutrition assistance, combined with finite resources, restrict planned interventions in the 2018-2020 time period. Furthermore, numerous other resources in the community are responding to this issue including the New York City Department for the Aging and initiatives funded by the New York City Council.

Planned activities for healthcare directly and indirectly related to an aging population are described below. These activities are in addition to the MSBI activities that impact multiple needs.

Health professions education
The health professions education activities of MSBI respond to both the current and future community health needs of individuals needing geriatric medical services. MSBI actively participates in over two dozen residency and fellowship programs. Residency and fellowship programs that are especially related to services that impact an aging population are as follows:

- Geriatric Medicine Fellowship
- Geriatric Psychiatry Fellowship

Patient representatives
At MSBI, patient representatives are available to assist patients and family members with any questions, complaints, or concerns regarding their health care or hospital services. Patient representatives are also available to provide information regarding patients’ rights as well as hospital policies and procedures.

Senior nursing
MSBI provides a Registered Nurse to work with the senior residents of the Naturally Occurring Retirement Community (NORC) Co-op Village. In 2016 there were 3,619 recorded interventions, a 2 percent increase over the 3,549 interventions in 2013. MSBI also provides a Registered Nurse on a part-time basis to counsel and monitor seniors at the Sage Senior Center on Manhattan’s Lower East Side. In 2016 there were 946 interventions, a 2 percent increase over the 928 in 2013.
Senior Health
At Mount Sinai Doctors Senior Health, primary care doctors, nurse practitioners, and social workers specializing in geriatrics help adults age 65 and older achieve independence and a healthier, better quality of life. Support services are available for residents and caregivers. When appropriate, medical care and social services are provided in the home. Specific issues for which services are offered include ones listed below:

- Memory loss and dementia;
- Depression;
- Osteoporosis;
- Incontinence; and
- Falling and balance problems.

B. Environmental Determinants of Health
The 2017 MSBI CHNA found that residents experience considerable traffic, pollution, crime, and noise, and that transportation is difficult for individuals with limited mobility. MSBI, together with the Mount Sinai Health System, has expertise and resources related to medical services. The resulting lack of core competencies in traffic, pollution, crime, and noise, combined with finite resources, restrict planned interventions in the 2018-2020 time period. Furthermore, numerous other resources in the community are responding to this issue including the New York City Department of Environmental Protection and the New York City Department of Transportation.

Planned activities indirectly related to environmental determinants of health are described below. These activities are in addition to the MSBI activities that impact multiple needs.

Referrals to Health Care Services
MSBI refers patients to various providers of health care services. As part of the Mount Sinai Health System, the continuum of care can be enhanced with referrals to effective services provided by other Mount Sinai hospital facilities and Mount Sinai health professionals. For example, pediatric patients in need of specialized clinical consultation can be referred to the T32 Pediatric Environmental Health Research Fellowship at Mount Sinai Hospital.

C. Homelessness
The 2017 MSBI CHNA found that homelessness is increasing in the community, and that homelessness is complex and intertwines other issues including affordable housing, access to mental health care, substance abuse, and poverty. MSBI, together with the Mount Sinai Health System, has expertise and resources related to medical services. The resulting lack of core competencies in short-term shelter and long-term housing, combined with finite resources, restrict planned interventions in the 2018-2020 time period. Furthermore, numerous other resources in the community are responding to this issue including the New York City Department of Homeless Services.
Planned activities indirectly related to homelessness are described below. These activities are in addition to the MSBI activities that impact multiple needs.

**Financial Assistance and Billing and Collections Policy**
MSBI, together with the other MSHS hospitals, recognizes that many of the patients served may be unable to access quality health care services without financial assistance. A Financial Assistance and Billing and Collections Policy for MSHS hospitals enables each hospital to uphold its mission, while carefully taking into consideration the ability of the patient to pay. The Billing and Collections Policy is applied in a fair and consistent manner for Emergency Medical Care and other Medically Necessary Care rendered in the MSHS hospitals by providers who are directly employed by or contracted by Icahn School of Medicine at Mount Sinai. The Financial Assistance and Billing and Collections Policy, as well as the application for Financial Assistance is available online (http://www.wehealny.org/services/financialassistance/index.html) in English, Spanish, Chinese, Haitian Creole, Polish, and Russian. A uniform Financial Assistance Policy across hospital facilities and providers and robust social services can help low-income patients manage treatment plans. A uniform Financial Assistance Policy across hospital facilities and providers and robust social services can help low-income patients manage treatment while remaining in their homes.

**D. Navigating a Changing Health Care Provider Environment**

The 2017 MSBI CHNA found that many changes in the healthcare space are leading to anxiety by residents, and that residents may be uncertain of how to access healthcare services. MSBI, together with the Mount Sinai Health System, has expertise and resources related to medical services, but insurance coverage and financial resources are predominant factors related to access to evolving healthcare provider options. The resulting lack of proven interventions, combined with finite resources, restrict planned interventions in the 2018-2020 time period. Furthermore, other resources in the community have greater abilities to assist in navigation, notably insurance providers.

Planned activities indirectly related to navigation are described below. These activities are in addition to the MSBI activities that impact multiple needs.

**Social Work Services**
Social Workers are part of the health care team in nearly every part of MSBI and its medical practices. Social Workers can help patients and their families during and after hospitalization, including assistance with managing medical care.

**Translation Services**
MSBI provides over the phone and in-person interpreter services, 24 hours a day, at no cost to patients. Included in translation services are sign language interpreters and telecommunication devices for the deaf (TDD). The New York State Patients’ Bill of Rights is available in Braille as well as in English and Spanish on closed-circuit television.
**Patient Representatives**
At MSBI, patient representatives are available to assist patients and family members with any questions, complaints, or concerns regarding their health care or hospital services. Patient representatives are also available to provide information regarding patients’ rights as well as hospital policies and procedures.

**The Preventable Admissions Care Team**
The Preventable Admissions Care Team (PACT) is an intensive, short-term transitional care program for patients at high risk for a 30-day readmission. Patients, covered by Medicare FFS or Healthfirst insurance, are identified based on assessed risk for 30-day readmission. Interventions include phone calls, accompaniments, and home visits. The PACT program is integrated with other care coordination initiatives at Mount Sinai Health System.

**Mount Sinai Access**
MSBI participates in Mount Sinai Access, a 24/7 concierge service available to assist physicians, patients, and family members connect with Mount Sinai specialists. Mount Sinai Access is staffed by nurses who work closely with physicians to arrange an outpatient appointment or peer to peer consultation as quickly as possible. Services are targeted to patients and families, as well as physicians to help coordinate patient care.

Note: As part of the Mount Sinai Health System, integrated resources help MSBI refer patients to effective primary and specialized care services provided by other hospital facilities and Mount Sinai health professionals. Supporting services can assist patients access needed care both within the Mount Sinai Health System and with other community organizations.

**E. Poverty, Financial Hardship, and Basic Needs Insecurity**

The 2017 MSBI CHNA found that lower-income residents can experience considerable difficulty in accessing basic needs, primary care access can be limited due to the relatively high cost of deductible / co-pays, and unmet mental health needs may be an issue due to daily stress. MSBI, together with the Mount Sinai Health System, has expertise and resources related to medical services. The resulting lack of core competencies in economic development, combined with finite resources, restrict planned interventions in the 2018-2020 time period. Furthermore, numerous other resources in the community are responding to this issue including the New York City Human Resources Administration/Department of Social Services.

Planned activities indirectly related to Poverty, Financial Hardship, and Basic Needs Insecurity are described below. These activities are in addition to the MSBI activities that impact multiple needs.

**Financial Assistance and Billing and Collections Policy**
MSBI, together with the other MSHS hospitals, recognizes that many of the patients served may be unable to access quality health care services without financial assistance. A Financial Assistance and Billing and Collections Policy for MSHS hospitals enables each hospital to uphold its mission, while carefully taking into consideration the ability of the patient to pay.
Billing and Collections Policy is applied in a fair and consistent manner for Emergency Medical Care and other Medically Necessary Care rendered in the MSHS hospitals by providers who are directly employed by or contracted by Icahn School of Medicine at Mount Sinai. The Financial Assistance and Billing and Collections Policy, as well as the application for Financial Assistance is available online (http://www.wehealny.org/services/financialassistance/index.html) in English, Spanish, Chinese, Haitian Creole, Polish, and Russian. A uniform Financial Assistance Policy across hospital facilities and providers and robust social services can help low-income patients manage treatment plans. A uniform Financial Assistance Policy across hospital facilities and providers and robust social services can help low-income patients manage treatment plans.

F. Safe and Affordable Housing

The 2017 MSBI CHNA found that increased safe and affordable housing, included security and maintenance of existing residential units, is needed within the community. MSBI, together with the Mount Sinai Health System, has expertise and resources related to medical services. The resulting lack of core competencies in residential housing, combined with finite resources, restrict planned interventions in the 2018-2020 time period. Furthermore, numerous other resources in the community are responding to this issue including the New York City Department of Housing Preservation and Development and the New York City Housing Authority.

Planned activities indirectly related to Safe and Affordable Housing are described below. These activities are in addition to the MSBI activities that impact multiple needs.

Referrals to Community Resources
MSBI refers patients to various community resources. As part of the Mount Sinai Health System, integrated resources help MSBI respond to patients in need. For example, robust social services can direct patients to community organizations that assist with housing needs.
6. Implementation Strategy Adoption

The Community and Government Affairs Committee of the Board of Trustees for MSBI reviewed and adopted this plan at its May 15, 2018 meeting.