

# Rural Community Health Improvement Partnership (R-CHIP) Presents:

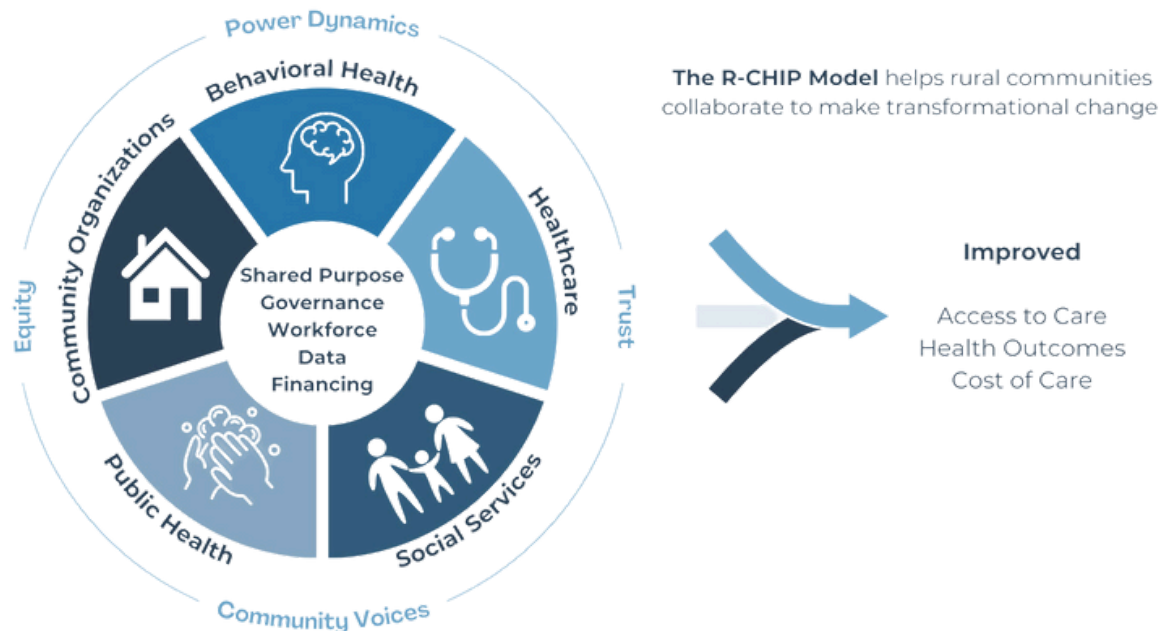
# A Roadmap to



# Improving Rural Health in Maine

## Overview

With increasing evidence of the powerful influence of social needs on health and health equity, health systems and communities in rural Maine are using diverse, multi-sector community partnerships to transform how patients in the health system obtain food, housing, and other community services as a critical part of their overall health care plan. The R-CHIP model seeks to integrate the often-siloed systems of health care, social service, and public health providers toward the ultimate goals of expanding access to needed services, improving health outcomes, and lowering the cost of care. For the past 18 months, health care, public health, social service, and other community-based organizations (CBOs) in Kennebec/Somerset, Aroostook, and Hancock/Washington counties have formed community-based partnerships with the goal of building the capacity to support service coordination and integration to address food insecurity, housing, transportation, and/or other health-related social needs (HRSNs) that limit access to vital health and social services and undermine the health of rural communities.



Drawing on similar initiatives elsewhere (CA, NC, RI, and other states), Maine's R-CHIP demonstration is using regional organizations as backbone "hubs" to:



Create community-based infrastructure and capacity for locally-designed decision-making processes



Engage individuals with lived experience in decision making



Address health workforce challenges



Develop new mechanisms for data sharing



Realign funding to support service integration across health care, social service, and other CBOs

## PHASE I: BUILDING THE FOUNDATION

The three demonstration sites have participated in Phase I of the R-CHIP demonstration (June 2023-November 2024) to identify priority HRSNs and develop strategies for addressing them. The Maine Department of Health and Human Services has funded Phase I with a federal grant from the US Centers for Disease Control and Prevention. MCD Global Health is serving as the Technical Assistance Hub to support a peer learning network, provide project planning support, oversee the independent evaluation, and help secure ongoing funding for the demonstration.

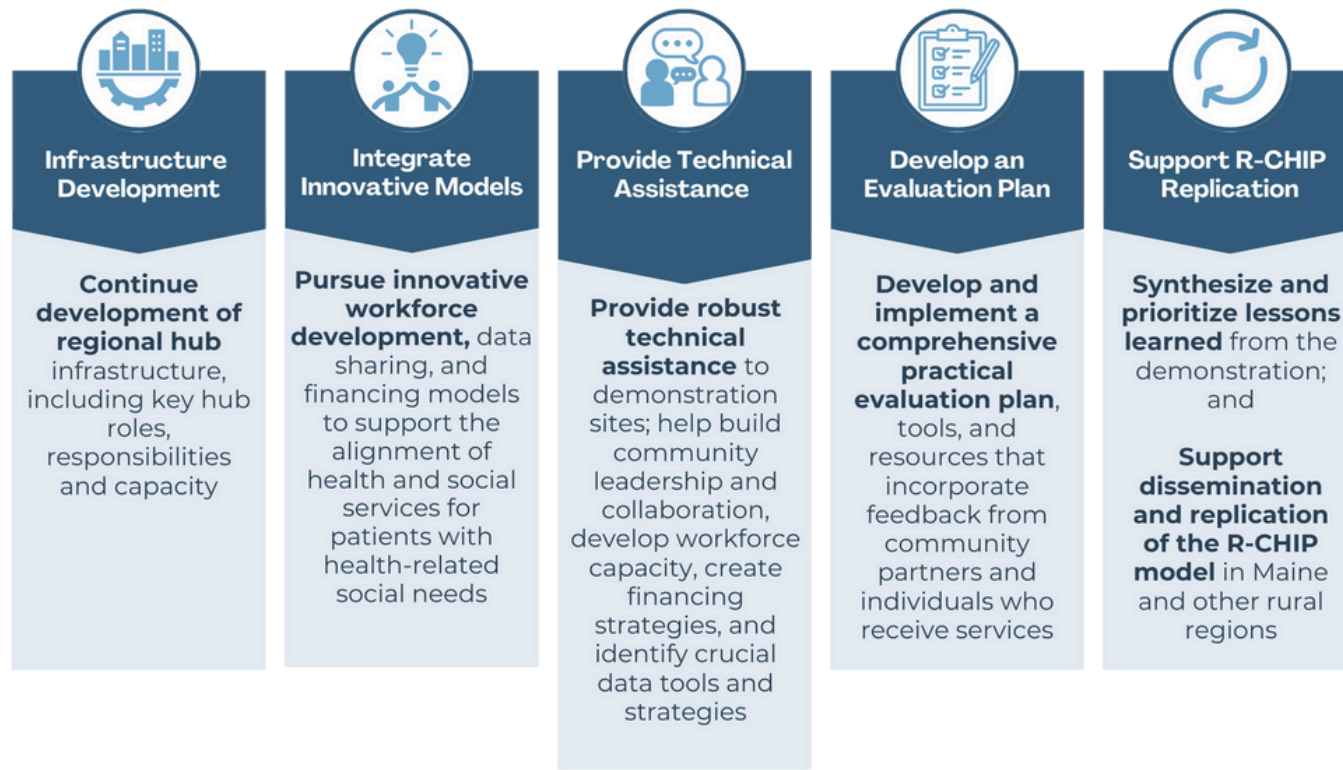
Having established the framework, structure, and governance systems needed for collaboration among diverse organizations, the regional partnerships are initiating projects to address lack of transportation, housing insecurity, and other social needs identified through comprehensive community-wide needs and readiness assessments. Together with MCD Global Health, the partnerships are actively working on key delivery system barriers to service coordination and integration, including strategies for data and information sharing, re-aligning health care, social service, and other funding streams to promote collaboration among service organizations.

## PHASE II: SUSTAINING PROGRESS

Each of the demonstration sites has established a regional partnership infrastructure, has strong local leadership and community engagement, and has conducted robust readiness assessments to identify priority local and regional community and health system needs and developed priority focus areas (see Appendix A). While each of the sites is actively soliciting funding for programmatic activities, Phase II “core” funding is needed to sustain the critical hub infrastructure that will be central to the success of the R-CHIP model in each of the three sites and the TA Hub. This “core” funding will accelerate dissemination and replication of the R-CHIP model to other rural regions and communities in Maine.

### Funding Ask

R-CHIP leaders, including representatives of each of the three demonstration sites, MCD Global Health, and the Maine Department of Health and Human Services, are seeking discussions with potential investors/partners interested in innovative approaches to rural health system transformation. More specifically, we are seeking core funding for Phase II of the demonstration, beginning January 1st, 2025, to:



Discussions with potential funders will include a more detailed description of site-specific goals, objectives, and outcomes, a financial pro forma, and the importance of a diverse portfolio of federal, state, regional, and local funders.

# Appendix A

## R-CHIP Phase 1 Accomplishments

### March 2023: Receive Funding

Three demonstration sites and the Technical Assistance Hub received Phase 1 funding from DHHS.



### Summer 2023: Establish Governance

During the first six months, each partnership focused on creating a vision, mission, decision-making process, and outlining roles and responsibilities.



### Spring/Summer 2024: Phase 2 Preparation

The demonstration sites formed workgroups, underwent trainings to build capacity, conducted research on evidence-based strategies and models, and applied for programmatic grant funding.



### Spring 2023: Partner Recruitment

Sites recruited diverse community partners to join their partnership and attend retreats and meetings.



### Fall 2023: Readiness Assessment

Each partnership assessed how well their community identifies and addresses health-related social needs (see Appendix D)



### Fall 2024: Phase 2 Planning + Funding

Each partnership will formulate a plan to improve how their community identifies and addresses health-related social needs. Sites will also continue to seek funding for Phase 2.



### Technical Assistance

Each site received peer learning opportunities, resources, readiness assessment support, and funding support from the Technical Assistance Hub.



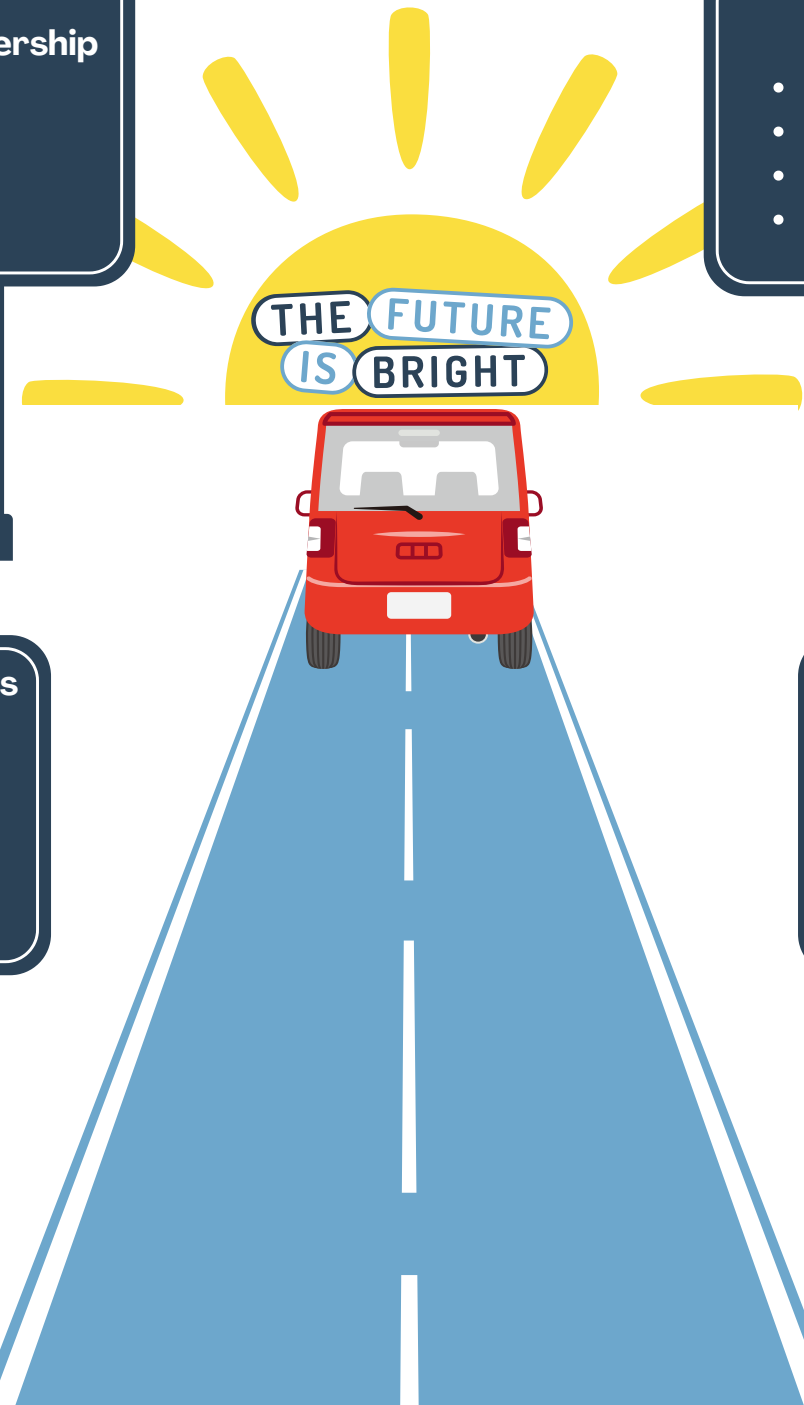
## APPENDIX B R-CHIP Phase 2 Priorities

### Aroostook County Health Improvement Partnership

- Access to Healthcare
- Transportation
- Social Connectedness + Belonging

### Technical Assistance Hub

- Sustainability
- Communications
- Evaluation/Data
- Workforce Development



THE FUTURE  
IS BRIGHT

### Somerset and Kennebec Counties Community Partnership

- Cross-sector Integration
- Deepen Community Collaboration
- Center Community Voice

### DownEast Housing Collaborative

- Emergency Housing
- Low-Income Housing
- Moderate-Income Housing



Somerset +  
Kennebec  
Counties  
Community  
Partnership  
(SKCCP)



Public Health  
Prevent. Promote. Protect.  
Central District

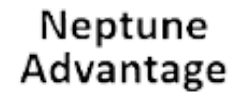


United Way  
of Kennebec Valley





**DownEast  
Housing  
Collaborative  
(DHC)**





**Aroostook  
County Health  
Improvement  
Partnership  
(A-CHIP)**





# APPENDIX D

## R-CHIP Demonstration Site Readiness Assessment Reports



### Downeast Housing Collaborative Readiness Assessment Report January, 2024

#### *Summary of Downeast Housing Collaborative & Readiness Assessment*

This Readiness Assessment (The Assessment) was created and prepared by the Downeast Housing Collaborative (The Collaborative). The Downeast Housing Collaborative, convened by Healthy Acadia, is a broad group of providers, organizational representatives, and community members in Hancock and Washington counties, whose mission is to improve health outcomes for individuals in our communities by focusing on safe and secure housing across the continuum as a primary resource for increasing individual well being. Our purpose is to bring people together from across sectors and to work collaboratively to improve regional systems, reduce housing insecurity, and increase access to housing across the continuum of need throughout Hancock and Washington counties, Maine.

The Assessment examines the state of housing and related Health Related Social Needs (HRSNs) across Washington and Hancock counties, Maine. The assessment lays a foundation of understanding and context in order for the Collaborative to create a plan to tackle challenges related to housing and other HRSNs across the continuum. For this assessment, we gathered four types of data: 1) community voice data from individuals across Washington and Hancock counties, regarding their experiences, needs, and views related to housing and other health related social needs; 2) health systems data, drawn from partners regarding existing housing and other health systems, and strengths, gaps, and needs within systems; 3) existing secondary data related to health status and housing information across Washington and Hancock counties, and 4) data on the strengths and opportunities for improvement within our Collaborative, through a Self-Evaluation.

#### *Summary of Process for creating the Readiness Assessment:*

In order to gather the needed data and create the Assessment, The Downeast Housing Collaborative created two committees: the Community Voice Committee and the Health Status and Systems Data Committee.

The Community Voice Committee focused on gathering the primary data from community members across the two counties. The Committee developed an in-depth written survey and distributed the survey across the region by utilizing our extensive network of community partners. The Committee also coordinated focus groups for a deeper dive into the experiences, strengths, challenges, needs, and visions of community members related to housing and related HRSNs.



### READINESS ASSESSMENT

AROOSTOOK COUNTY HEALTH IMPROVEMENT PARTNERSHIP

JANUARY 2024