2025 - 2028

Hospital Implementation Strategy Plan

Yale NewHaven Health

Westerly Hospital

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Prepared by Crescendo Consulting Group

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INTRODUCTION

Westerly Hospital is committed to improving the health and wellbeing of residents in Westerly and the surrounding communities. As a not-for-profit hospital, Westerly Hospital conducts a Community Health Needs Assessment (CHNA) every three years, as required by Section 501(r)(3) of the Internal Revenue Code. This assessment identifies the most pressing health needs in the community and helps guide the hospital's efforts to address them.

The 2025 CHNA process included input from a range of community members, including public health experts and representatives of under-resourced populations. This inclusive approach ensures that the assessment and its findings reflect the diverse health needs and experiences of the community.

The findings in the CHNA report informed this Implementation Strategy Plan (ISP), which outlines specific actions Westerly Hospital will take to address identified health needs over the next three years. The CHNA report was approved by the Westerly Hospital Board of Trustees on September 26, 2025, and the ISP on December 2, 2025. The documents will be made publicly available, to ensure transparency and accountability.

ABOUT WESTERLY HOSPITAL

Westerly Hospital, located in Westerly, Rhode Island, is a not-for-profit community hospital and a member of Yale New Haven Health. The hospital provides a wide range of high-quality medical, surgical, diagnostic, and emergency services to residents of southwestern Rhode Island and southeastern Connecticut.

Westerly Hospital includes inpatient and outpatient services, a full-service emergency department, diagnostic imaging, physical therapy and rehabilitation, and surgical care. It is also home to a state-of-the-art ambulatory surgery center and offers specialty services in cardiology, oncology, orthopedics, and women's health through partnerships within the Yale New Haven Health.

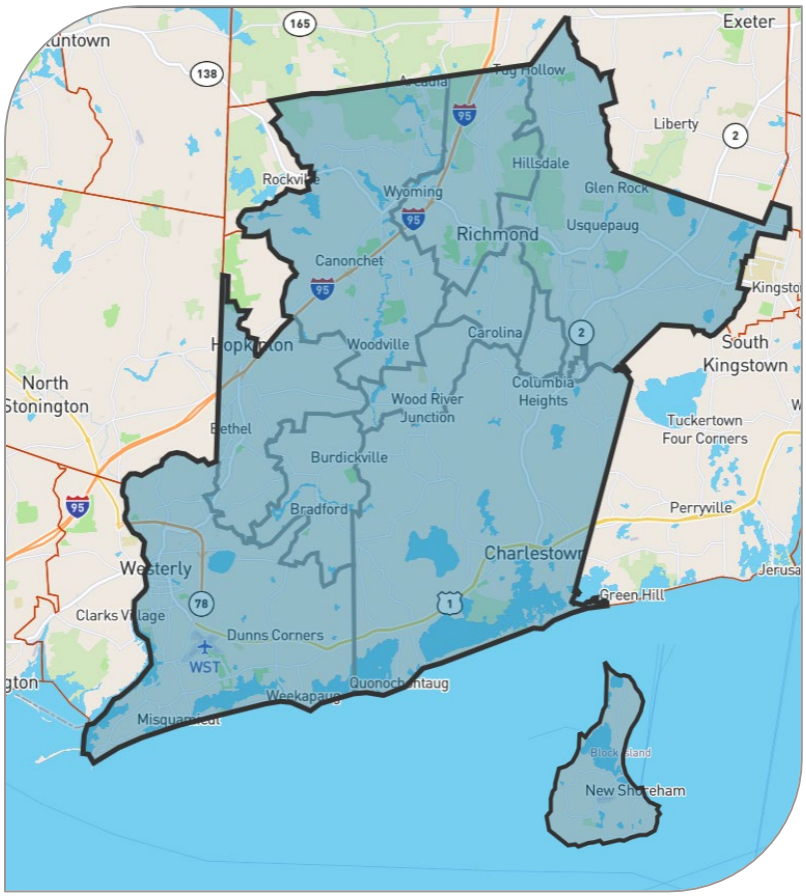
With a strong focus on community wellness, Westerly Hospital is committed to expanding access to care and addressing health needs through outreach programs, preventive care, and collaboration with local organizations. The hospital's integration with Yale New Haven Health ensures access to advanced clinical resources while maintaining personalized, community-based care.

For more information, visit Westerly Hospital's website at www.westerlyhospital.org.

SERVICE AREA

The Westerly Hospital service area includes the municipalities of Ashaway (02804), Bradford (02808), Carolina (02812), Charlestown (02813), Hope Valley (02832), Hopkinton (02833), Westerly (02891), West Kingston (02892), Wood River Junction (02894), Wyoming (02898), and Block Island (02807).

These towns are located in Washington County, Rhode Island.



COMMUNITY HEALTH NEEDS ASSESSMENT OVERVIEW

This section was provided by Build Community as a part of the 2025 CHNA, conducted in collaboration with the Hospital Association of Rhode Island to identify statewide and local health priorities.

The CHNA was conducted in collaboration with research partner Build Community from October 2024 to June 2025 and included primary and secondary research methods to determine health trends and disparities in the Westerly Hospital service area.

Primary Research and Community Engagement

Community engagement was an integral part of the CHNA. Collaborating with community-based organizations across Rhode Island, input was invited and received from a wide array of community stakeholders with a particular focus on diverse populations, under-resourced areas, and communities that have been historically marginalized. Study participants provided perspectives on unmet health and social needs; community resources available to meet those needs; barriers to accessing services; service delivery gaps; and recommendations to improve health and well-being.

Secondary Data Analysis

The most recently available data at the time of publication is used throughout the study. Reported data typically lag behind "real time." Secondary data are reported by county and by zip code, as available, to demonstrate localized health needs and disparities. Data for Rhode Island's "core cities," identified as Central Falls, Pawtucket, Providence, and Woonsocket, are also reported. The core cities are communities that have historically experienced greater economic distress and greater potential for health inequity. A comprehensive list of secondary data sources is included in Appendix A.

Analysis of Health and Socioeconomic Data

We collected and analyzed public health statistics, demographic and social measures, housing and economic data, and other data to develop a comprehensive community profile for all of Rhode Island and its residents.

Partner Forum

We held a community meeting with 24 health and human service professionals serving Washington County to share CHNA data findings and collectively define challenges and meaningful strategies for health improvement. Attendees included healthcare and social services providers, educators, and community leaders, among others.

Key Informant Survey

An online survey was conducted with 120 individuals serving diverse communities and populations across Rhode Island to collect input about local health needs, client experiences in receiving and accessing services, and opportunities for collective impact.

Focus Groups

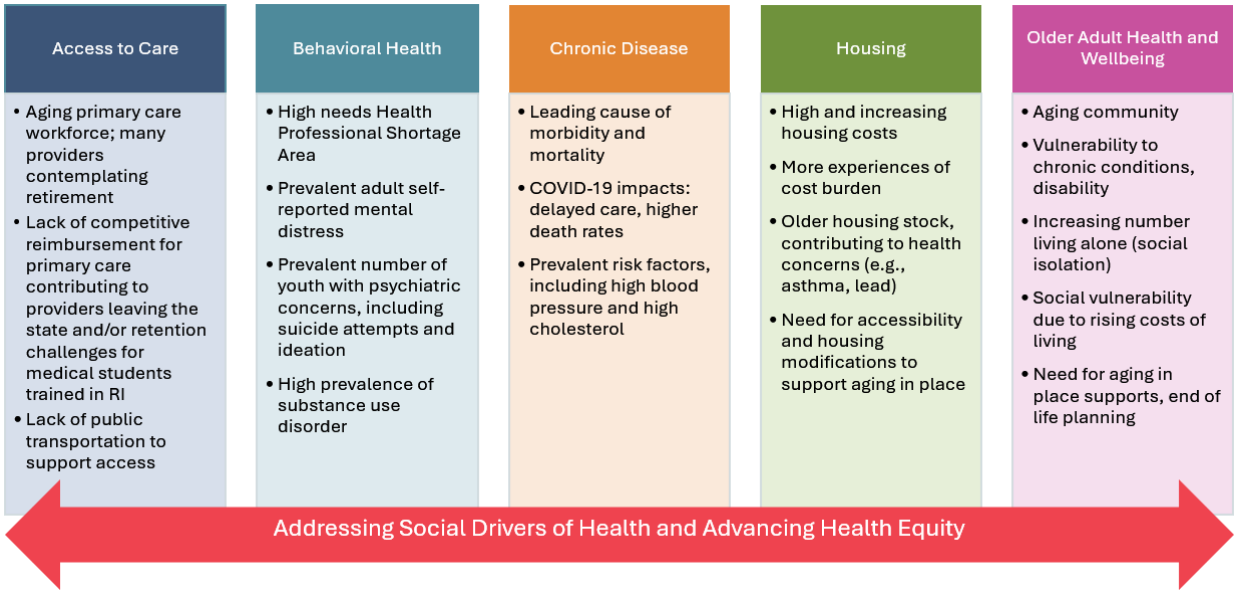
Focus groups were held with older adult residents of Washington County to discuss their experiences accessing health and social services; identify available and needed community resources to support health and well-being; and gather community recommendations and insights on solutions.

IMPLEMENTATION STRATEGY PLAN METHODOLOGY

Westerly Hospital developed this Implementation Strategy Plan through a structured, multi-phase process that integrated data analysis, evidence-based research, and community input to identify and address community health priorities.

Prioritization of Community Health Needs

At a Partner Forum with Washington County health and human services professionals, held in collaboration with research partner Build Community, participants reviewed CHNA findings to identify the most pressing health needs in the community. The graphic below shows the top priorities and the contributing factors that affect Westerly Hospital's service area. Social factors that influence health were considered important elements affecting all of the identified needs.



Source: Build Community, 2025

Hospital Priority Areas

The community priorities identified were presented to the Westerly Hospital leadership who agreed to adopt three community identified priorities: Access to Care, Behavioral Health, and Chronic Disease.

Health System Priority Area

Community members, from across our hospital regions, identified cultural competency as a need during the 2025 CHNA process. This valuable feedback revealed opportunities to improve patient care by expanding language access and cultural sensitivity training and education for staff.

In response, Yale New Haven Health (YNHHS) selected Culturally Competent Care as a 2025-2028 priority area and will be implementing national standards for Culturally and Linguistically Appropriate Services (CLAS) at each of our hospitals. These standards will enhance the existing quality of service provided to all patients, ensuring respect for every patient's health needs and preferences. The progress of these standards will be measured with both process and outcome measures aligned with system Patient Experience metrics connected to our Press Ganey Surveys.

The Press Ganey Survey gathers patient feedback on the care and services received during their hospital stay or ambulatory visit. This valuable input helps us identify opportunities for improvement, ensure the highest quality of care, and enhance the overall patient experience. The survey addresses key aspects of the patient experience, including communication with health care staff, the care environment, and overall satisfaction with treatment.

Development of Strategies and Actions

To formulate effective strategies for the prioritized health needs, Westerly Hospital undertook the following steps:

- **Best Practices Literature Review**: Conducted a comprehensive review of current best practices and evidence-based interventions related to Access to Care, Behavioral Health, and Chronic Disease.
- **Subject Matter Expert Interviews**: Engaged with internal and external experts to gather insights and recommendations on feasible and impactful strategies.
- **Review of Existing Hospital Programs**: Assessed current Westerly Hospital programs and initiatives addressing the identified health needs to identify opportunities for enhancement and alignment with best practices.

Community Engagement and Strategy Refinement

Westerly Hospital and Crescendo Consulting Group facilitated a dedicated virtual strategy session with hospital leadership to discuss the goals and strategies for the prioritized hospital health needs.

Participants collaboratively discussed goals using the SMART (Specific, Measurable, Achievable, Relevant, Time-bound) framework, brainstormed potential interventions, and refined strategies. This collaborative approach ensured that the selected strategies are both evidence-based and tailored to the specific needs and capacities of the community and the hospital.

Definition of Terms

To ensure clarity and consistency throughout the Implementation Strategy Plan, the following terms are defined. These terms describe how the hospital organized its approach to addressing community health needs, setting goals, and identifying strategies and actions for the 2025–2028 planning cycle.

Term	Definition
Priority Areas	Selected community health needs for the 2025-2028 ISP.
Goal	Future desired result of each priority area written as a SMART goal statement.
Strategy	What the hospital is doing to reach the priority area goal.
Action	Approximately 1-5 for each strategy, though not all strategies may have actions.

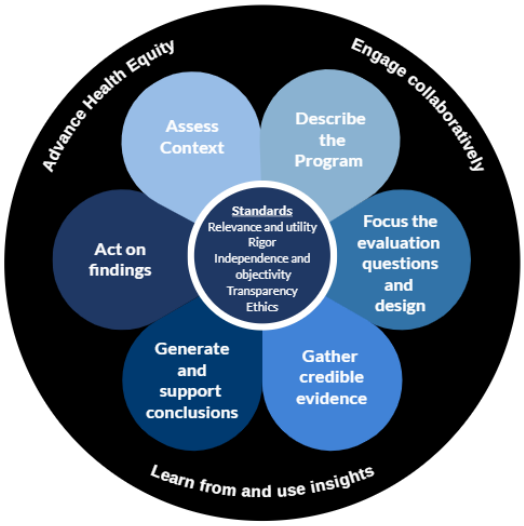
Hospital Response to Top Regional Needs

Health Need Identified by Community in CHNA	Hospital's Response
▶ Access to Care	This need has been identified as a priority health need. See page 11 for our plan to address it.
▶ Behavioral Health	This need has been identified as a priority health need. See page 12 for our plan to address it.
▶ Chronic Disease	This need has been identified as a priority health need. See page 13 for our plan to address it.
Housing	This need is being addressed by community organizations specializing in this area. Westerly Hospital provides support to two collaboratives working on housing: Age Friendly Westerly and the Health Impact Collaborative of Greater Westerly.
Older Adult Health & Wellbeing	This need is being addressed by community organizations specializing in this area. Westerly Hospital provides support to two collaboratives working on housing: Age Friendly Westerly and the Health Impact Collaborative of Greater Westerly.

▶ Indicates hospital priority health need

Evaluation Plan

Evaluation of any Implementation Strategy Plan (ISP) is just as critical as the implementation of strategies, programs, and initiatives. To measure progress of goals, Yale New Haven Health (YNHHS) will utilize an adapted framework from the Center for Disease Control and Prevention (CDC) for Program Evaluation (2024). The three foundational principles of the Framework are: work collaboratively, improved health outcomes for all, and learn from and apply insights.



The Framework includes six steps to complete a successful evaluation:

1. Assess the context
2. Describe the program
3. Focus the evaluation question and design
4. Gather credible evidence
5. Generate and support conclusions
6. Act on findings

YNHHS will evaluate the progress on each goal on an annual basis. Starting at Year 0, YNHHS will determine the baseline for each goal. Each year after Year 0, the progress will be measured against the baseline. Whenever possible, YNHHS will use local, state, and national benchmarks, such as Healthy People 2030 or County Health Rankings, as additional benchmarks to measure against each year.

The evaluation of the ISP should include both quantitative and qualitative assessments as not every goal can be successfully measured quantitatively. It is important to learn qualitative findings, such as the human stories to each.

IMPLEMENTATION STRATEGY PLAN SUMMARY

Hospital Priority Area 1: Access to Care	
Goal	**Support initiatives that reduce access barriers and improve connection to primary and preventive care by 2028.**
Strategy 1	**Advocate for increased access to care through the legislative process.**
Action 1.1	Collaborate with community partners on bills that will expand access to care.
Action 1.2	Collaborate with the Hospital Association of Rhode Island, and other partners to raise this issue with Rhode Island Policymakers.
Action 1.3	Develop stories of patients, providers, and hospital leaders to provide to policymakers to elevate the Westerly Communities message on this issue.
Strategy 2	**Support efforts to reduce hospital readmissions through improved discharge education, care coordination, and follow-up.**
Action 2.1	Develop personalized care plans for multi-visit patients.
Action 2.2	Build capacity to guide patients in need of non-emergency care for ambulatory CORE (Collaborations, Optimization, Resiliency, and Efficiency) initiatives.

Hospital Priority Area 2: Behavioral Health	
Goal	**Collaborate with organizations to enhance behavioral health services and improve coordination across levels of care by 2028.**
Strategy 1	**Maximize behavioral health access through existing services and collaboration.**
Action 1.1	Increase awareness of the Geriatric Psychiatry program.
Action 1.2	Collaborate with Age Friendly Westerly to address housing, transportation and communication to reduce isolation among older adults.
Strategy 2	**Improve transitions of care between emergency, inpatient, and community-based behavioral health programs.**
Action 2.1	Explore community partnerships to expand access to behavioral health care.
Strategy 3	**Pursue legislative advocacy around behavioral health supports.**
Action 3.1	Work and partner with organizations to provide data and information to policymakers.
Strategy 4	**Support behavioral health workforce development through recruitment and ongoing training.**
Action 4.1	Provide training to healthcare and other providers to prevent suicide.
Action 4.2	Increase recruitment efforts to properly staff behavioral health services.
Action 4.3	Resource sharing and education, to align resources within the hospital setting.
Action 4.4	Provide psychiatric care training for nursing staff to enhance their ability to support patients with mental health needs.

Hospital Priority Area 3: Chronic Disease	
Goal	**Collaborate with programs that provide education, prevention, and management for chronic conditions by 2028.**
Strategy 1	**Collaborate with community organizations who support prevention and self-management of chronic conditions to reduce hospital utilization rates.**
Action 1.1	Explore community paramedicine programs to deliver in-home care and chronic disease management.
Action 1.2	Participate in wellness events to promote health literacy and wellness.
Action 1.3	Support and promote awareness of existing community-based services and resources in the region.
Strategy 2	**Strengthen care coordination and follow-up for patients with multiple complex conditions to decrease unnecessary readmission.**
Action 2.1	Continue to follow-up with patients from the post-discharge call center to address immediate clinical and SDOH needs.
Strategy 3	**Support outreach initiatives to increase awareness and early detection of chronic disease.**
Action 3.1	Collaborate with partners to leverage existing communication tools to increase community awareness and participation of early detection chronic disease programs.
Action 3.2	Host community educational sessions about variety of diseases and health conditions by our team of healthcare providers.
Action 3.3	Maintain community outreach for CT lung screening program.

System Priority Area: Culturally Competent Care	
Goal	**Support improvement of quality of service and patient experience performance at Westerly Hospital and its regional ambulatory sites by 5% by 2028 as measured by meeting the target goal for "Likelihood of Recommending" on Press Ganey Surveys.**
Strategy 1	**Implement National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care at Westerly Hospital.**
Action 1.1	Create System / Westerly Hospital CLAS Advisory Council with a focus on oversight and implementation.
Action 1.2	Centralize interpreter dispatch system and real-time dashboards.
Action 1.3	Co-design three culturally responsive care protocols.
Action 1.4	Launch simulation training focused on respect and inclusive practices.
Action 1.5	Expand Patient Family Advisory Councils (PFACs).
Action 1.6	Identify health care gaps for closure by patient demographics.