Central Maine Medical Center

Community Health Improvement Plan 2026 – 2028



Health Priority: Mental Health

Goal 1: Improve access to mental health services within the Central Maine Medical Center (CMMC) service area

Outcome Measure: Increase in percentage of adults currently receiving outpatient mental health treatment in Androscoggin County¹

Strategies	Description of Activities	Measures	Partners
Strategy 1:	Develop an awareness campaign for Mental Health	Campaign created	CMH Marketing and
Increase educational	Awareness Month in May	• # Materials created and shared	Communications, CMH
opportunities about mental health topics in the service area	Host and promote mental health trainings such as Youth/Adult Mental Health First Aid, Suicide Prevention, Resilience and Positive/Adverse Childhood Experiences,	# Trainings hosted# Trainings promoted# Attendees	Learning and Development, NAMI Maine, and Community Concepts Inc.
	etc.		

Goal 2: Improve integration and awareness of supports related to mental health and resiliency within the CMMC service area **Outcome Measure**: Decrease in percentage of high school students reporting feeling sad or hopeless for two weeks in a row

Strategies	Description of Activities	Measures	Partners
Strategy 1:	Optimize use of Project Support You (PSY) in the ED	• # PSY contacts in ED	Spurwink, CMMC ED, CMH
Increase availability of	Add resources to all patient visit summary paperwork	Resources added to paperwork	Volunteer Services, CMH
mental health supports	Explore creating a youth mentorship program	 # Team members involved # Youth engaged	Learning and Development, Arts and Culture L/A, CMH IS,
	Explore opportunities to incorporate and promote arts and art therapy in the community and hospital	# Opportunities offered# Connections made	Central Maine Family Medicine Residency, University of Maine at Farmington Art Therapy Program, local community partners, and local schools
Strategy 2: Support the work of	Display and share physical and digital materials from community partners	# Materials created and shared	Local community partners, CMH IS, and CMH Marketing
community partners addressing mental health	Participate in mental health related community meetings and events	# Community meetings and events supported	and Communications
	Continue to maintain community resource guides, or explore feasibility to utilize FindHelp	# Visits to CMH resources page# Portal database visits	

¹ Outcome measures have been pulled directly from the Community Health Needs Assessment Data Report

Health Priority: Substance Use

Goal 1: Improve access to substance use services at CMMC

Outcome Measure: Reduce number of drug-induced deaths per 100,000 population

Strategies	Description of Activities	Measures	Partners
Strategy 1:	Develop an awareness campaign for National Recovery	Campaign created	CMH Marketing and
Increase awareness and	Month in September	 # Materials created and shared 	Communications, Spurwink,
utilization of substance use	Work with Lewiston Auburn Area Recovery Collaborative	Service map developed	CMMC ED, System Director
supports	(LAARC) to develop a Service Map of Androscoggin County	# Providers included	of Behavioral Health, LAARC,
	providers		and CMH IS
	Optimize use of OPTIONS Program in the ED	• # OPTIONS contacts in ED	
	Add resources to all patient visit summary paperwork	Resources added to paperwork	
	Continue to maintain community resource guides, or	• # Visits to CMH resources page	
	explore feasibility to utilize FindHelp	 # Portal database visits 	
Strategy 2:	Support the system-wide Naloxone Distribution Program	# Naloxone distributed	System Director of Behavioral
Increase prevention efforts		• # Sites onboarded	Health, MaineGeneral, CMH
within the CMMC service	Increase awareness of current substance use screenings	# Educational opportunities	Clinical Education
area	among clinical team members/providers	# Uses of screening tool	

Goal 2: Improve awareness of and access to substance use resources within the CMMC service area

Outcome Measure: Reduce percentage of middle school students that report past 30-day use of prescription drugs

Strategies	Description of Activities	Measures	Partners
Strategy 1: Increase availability and	Work with Pharmacy to distribute substance use and safe disposal resources	# Materials created and shared	CMH Community Pharmacy, local community partners,
awareness of safe storage/disposal avenues	Support community organizations that provide substance use education, safe medication storage and disposal	# Events and programs supported	and CMH Marketing and Communications
	Explore placing a permanent medication disposal box for public use within the hospital	Feasibility review completed	
Strategy 2: Support the work of	Display and share physical and digital materials from community partners	# Materials created and shared	Local community partners and CMH Marketing and
community partners that are addressing substance	Participate in substance use related community meetings and events	# Community meetings and events supported	Communications
use	Hold Naloxone administration trainings in the community with local organizations	# Naloxone trainings# Attendees	

Health Priority: Poverty

Goal 1: Build capacity within the CMMC service area to support integration of resources and services related to addressing poverty **Outcome Measure**: Increase in percentage of those 25 years or older with an Associate's Degree or higher

Strategies	Description of Activities	Measures	Partners
Strategy 1:	Add resources to all patient visit summary paperwork	Resources added to paperwork	CMH IS, Community Credit
Increase opportunities to connect with community	Continue to maintain community resource guides, or explore feasibility to utilize FindHelp	# Visits to CMH resources page# Portal database visits	Union, and local community partners
resources	 Explore implementing the Income Advance Program with Community Credit Union 	Feasibility review completed	
	Support community organizations and promote programs	# Programs supported	
	Participate in poverty-related community meetings and events	# Community meetings and events supported	
Strategy 2: Increase the measurement	• Support the expansion of social drivers of health screening and referral in outpatient and ambulatory practices	• # Patients screened	CMH Affordable Care Organization and CMH IS
of non-medical factors that influence health	Explore feasibility of incorporating patient navigation systems into the hospital	Champion identified Feasibility review conducted	

Goal 2: Explore opportunities to collaborate with community organizations addressing poverty **Outcome Measure**: Decrease in percentage of individuals living in poverty

Strategies	Description of Activities	Measures	Partners
Strategy 1:	Work with CityLink Bus to increase access to local food	# Ride program participants	CityLink Bus, local food
Improve access to existing	pantries	 # Food pantries connected 	pantries, Central Maine
resources and health care		Route map developed	Family Medicine Residency,
for community members	Plan and hold Clinic in the Community events in rotating	• # Clinics held per year	Maine College of Health
	locations in the community	# Visitors per clinic	Professions, local community
	Promote and provide health education opportunities in the	# Education opportunities	partners, and CMH
	community	• # Attendees	Marketing and
	Create connections with trusted community-based	• # CBO connections made	Communications
	organizations (CBO)	Promote improved language	
		services	
Strategy 2:	Promote and hold Bridges Out of Poverty trainings for	• # Trainings held and promoted	Community Credit Union,
Increase training and	team members and community members	• # Participants	CMH Volunteer Services,
education program	Increase the number of local youths engaged through job	• # Team members involved	local high schools, Jobs for
opportunities	shadow programs	• # Youth engaged	Maine Graduates, Career
	Explore connections with Technical High Schools, Career	• # Connections made	Centers, and CMH Learning
	Centers, and Jobs for Maine Graduates		and Development

Health Priority: Infrastructure Support

Goal 1: Improve infrastructure for Community Benefit throughout CMMC and area practices to create more effective communication and collaboration opportunities

Outcome Measure: Increased connection to and consistent engagement with identified champions

Strategies	Description of Activities	Measures	Partners
Strategy 1:	Create a communication channel and an infrastructure	Communication channel created	CMMC, Senior Leadership
Develop a consistent and	map of Community Health Improvement Plan (CHIP)	Internal infrastructure map	Team, Vice Presidents,
open communication	connections for internal use	created	Chiefs, and Directors
channel	Designate champion(s) in hospital structure for the CHIP	Champion(s) identified	
	Coordinator to meet with regularly to provide support	Regular check ins established	
	Provide regular CHIP updates at internal team meetings	• # Team meetings participated in	

Central Maine Healthcare/Affiliate Hospital:	Central Maine Medical Center
County:	Androscoggin County
Health Priority:	PRIORITIES NOT SELECTED

Priority	Why We Did Not Choose This Priority	Organizations That Are Addressing This Priority
Housing	Community stakeholders that participated in the forums voted on the top health priorities for their communities. The CMH Adhoc Workgroup then chose three system-wide priorities that were determined to be more feasible to pursue based on capacity, limited resources of the project, and existing structures in place to support work. The Adhoc Workgroup did not choose Housing because there are a variety of organizations in the area addressing this need.	 Choice Neighborhoods Lewiston Housing Authority Auburn Housing Authority L/A Metropolitan Chamber of Commerce Lewiston Housing Committee Rural Community Action Ministry Community Concepts Inc. Healthy Homeworks Local Day and Overnight Shelters
Provider Availability	Community stakeholders that participated in the forums voted on the top health priorities for their communities. The CMH Adhoc Workgroup then chose three system-wide priorities that were determined to be more feasible to pursue based on capacity, limited resources of the project, and existing structures in place to support work. The Adhoc Workgroup did not choose Provider Availability because there are a variety of organizations in the area addressing this need.	 Local hospitals and health centers CMH Talent Acquisition Local Post-Secondary Education Institutes Job Training Organizations Technical High Schools
Adverse Childhood Experiences	Community stakeholders that participated in the forums voted on the top health priorities for their communities. The CMH Adhoc Workgroup then chose three system-wide priorities that were determined to be more feasible to pursue based on capacity, limited resources of the project, and existing structures in place to support work. The Adhoc Workgroup did not choose Adverse Childhood Experiences because there are a variety of organizations in the area addressing this need.	 Maine Youth Thriving Pinetree Institute Community Concepts Inc. LA Youth Network Local Youth-Serving Organizations
Nutrition	Community stakeholders that participated in the forums voted on the top health priorities for their communities. The CMH Adhoc Workgroup then chose three system-wide priorities that were determined to be more feasible to pursue based on capacity, limited resources of the project, and existing structures in place to support work. The Adhoc Workgroup did not choose Nutrition because there are a variety of organizations in the area addressing this need.	 Local pantries Nutrition Center programming Women, Infants, and Children (WIC) Supplemental Nutrition Assistance Program Education (SNAP-Ed) Androscoggin County Gleaners Community Gardens

Priority	Why We Did Not Choose This Priority	Organizations That Are Addressing This Priority
Illicit Drug Use Adult Screening &	Community stakeholders that participated in the forums voted on the top health priorities for their communities. The CMH Adhoc Workgroup then chose three system-wide priorities that were determined to be more feasible to pursue based on capacity, limited resources of the project, and existing structures in place to support work. In choosing Substance Use as a priority for the plan, we grouped all substance use together to focus on. Community stakeholders that participated in the forums voted on the	 St. Mary's Inpatient Treatment for Substance Use, Abuse, and Addiction Recovery-Oriented Organizations Lewiston Area Public Health Committee Syringe Exchange Programs The Overdose Prevention Through Intensive Outreach Naloxone and Safety (OPTIONS) Program Lewiston Auburn Area Recovery Collaborative Local hospitals and health centers
Preventative Visits	top health priorities for their communities. The CMH Adhoc Workgroup then chose three system-wide priorities that were determined to be more feasible to pursue based on capacity, limited resources of the project, and existing structures in place to support work. The Adhoc Workgroup did not choose Adult Screening & Preventative Visits because there are a variety of organizations in the area addressing this need.	 Community Health Workers New Mainer Public Health Initiative
Cardiovascular Disease	Community stakeholders that participated in the forums voted on the top health priorities for their communities. The CMH Adhoc Workgroup then chose three system-wide priorities that were determined to be more feasible to pursue based on capacity, limited resources of the project, and existing structures in place to support work. The Adhoc Workgroup did not choose Cardiovascular Disease because there are a variety of organizations in the area addressing this need.	 Local hospitals and health centers Community Health Workers Auburn/Lewiston YMCA Lewiston Recreation Auburn Recreation SeniorsPlus