

Fiscal Year 2025

Community Benefit Report

Central Maine Healthcare

May 2026



Table of Contents	Page
Introduction	Page 2
The Communities We Serve	Page 2
The 2022 Maine Shared Community Health Needs Assessment	Page 3
Community Health Improvement Plans	Page 3
Progress Update for Year 3 Activities	Page 4
Priority 1: Mental Health	Page 4
Priority 2: Substance Use Disorder	Page 5
Priority 3: Social Determinants of Health (Rumford Hospital Only)	Page 6
Priority 4: Diversity, Equity, Inclusion, and Belonging	Page 7
The 2025 Maine Shared Community Health Needs Assessment	Page 8
Addressing the Social Determinants of Health	Page 9
Community Resource Database	Page 9
Hunger Vital Signs	Page 9
Cribs for Kids	Page 10
Car Seat Safety	Page 10
Summary	Page 10

Table of Tables	Page
Table 1: Demographics of the CMH Service Area	Page 2
Table 2: Top Health Priorities Identified in the 2022 CHNA Forums	Page 3
Table 3: Top Health Priorities Identified in the 2025 CHNA Forums	Page 8
Table 4: Community Resource Database Usage for FY25	Page 9
Table 5: Hunger Vital Signs Program Usage for FY25	Page 10

Definition of Acronyms	Acronym
Adverse Childhood Experiences	ACEs
Central Maine Healthcare	CMH
Central Maine Medical Center	CMMC
Community Health Improvement Plan	CHIP
Community Health Needs Assessment	CHNA
Diversity, Equity, Inclusion, and Belonging	DEIB
Emergency Department	ED
Fiscal Year	FY
Hunger Vital Signs	HVS
Intentional Peer Support	IPS
Lesbian, Gay, Bisexual, Transgender, Queer	LGBTQ
Maine Community Action Partnership	MeCAP
Maine Shared Community Health Needs Assessment	Maine Shared CHNA
Social Determinants of Health	SDOH
Substance Use Disorder	SUD
Western Maine Addiction Recovery Initiative	WMARI
Youth Mental Health First Aid	YMHFA

Introduction

Supporting the residents of Maine in becoming healthy, vibrant community members is the responsibility of many organizations and individuals. Central Maine Healthcare (CMH) takes this responsibility seriously by providing exceptional healthcare services in a safe and trusting environment through the expertise, commitment, and compassion of our team of caregivers. In addition to providing direct healthcare services, CMH recognizes that our responsibility also includes connecting with our community members and supporting them in improving their own health and the health of others. This means stepping outside of our hospitals and practices to listen, collaborate, and plan with a diverse set of patients, local businesses, municipal leaders, youth, and other populations not typically engaged in healthcare.

The CMH system includes Central Maine Medical Center (CMMC) in Lewiston (Androscoggin County), Bridgton Hospital in Bridgton (Cumberland County), and Rumford Hospital in Rumford (Oxford County). This report details Community Benefit activities that CMH implemented in Fiscal Year (FY) 2025 from July 1, 2024 through June 30, 2025. The report also fulfills the IRS 990 reporting requirements for non-profit healthcare systems. This report includes the following:

- accomplishment highlights from the third and final year of the 2023-2025 Community Health Improvement Plans
- an overview of the 2025 Maine Shared Community Health Needs Assessment
- additional CMH Community Benefit activities.

The Communities We Serve

Central Maine Healthcare is comprised of three hospitals serving three unique communities. Central Maine Medical Center is located in the heart of Lewiston, which is the second largest city in Maine. Lewiston has been shaped by its history of welcoming new community members and immigrants, first from Canada and more recently from various African nations. Both Bridgton Hospital and Rumford Hospital serve more rural populations. Though Cumberland County is one of the most populated counties in the state, Bridgton, which is part of the Lake Region area of the county, mirrors many of the attributes of the more rural Oxford County, which is the Lake Region's northern neighbor. Bridgton is influenced by its status as a summer tourist destination. During the summer months, the Bridgton community sees a large influx of visitors and seasonal residents. Rumford is located in northern Oxford County and is generally more remote than the other hospital regions in the system. Rumford's economy and community have been greatly influenced by the timber industry and the operations of the ND Paper Mill. The data below is from the [2025 Data Health Profiles](#).

Table 1: Demographics of the CMH Service Area

	Maine	Androscoggin County	Cumberland County	Oxford County
Population size	1,366,949	111,532	303,357	58,276
Median household income	\$68,251	\$64,500	\$87,710	\$54,780
Unemployment rate (%)	3.1%	2.9%	2.3%	3.1%
Individuals living in poverty (%)	10.9%	12.4%	7.2%	14.4%
Children living in poverty (%)	13.4%	17.8%	6.9%	21.2%

The 2022 Maine Shared Community Health Needs Assessment

The Maine Shared Community Health Needs Assessment (Maine Shared CHNA) is a collaborative that coordinates a statewide effort to conduct a needs assessment. It is comprised of all four major healthcare systems in the state: Central Maine Healthcare, MaineHealth, MaineGeneral, and Northern Light Health, as well as the Maine Center for Disease Control & Prevention. The Maine Shared CHNA process occurs in three-year cycles, beginning with a statewide Community Health Needs Assessment (CHNA), followed by the creation of detailed data profiles for each county. The 2022 Maine Shared CHNA process utilized county-wide stakeholder forums, focus groups, and key informant interviews to collect data on health concerns and select top health priorities in each county. Finally, a Community Health Improvement Plan (CHIP) is developed and implemented for each hospital.

Health priorities for each county were identified through community participation and voting at the forums held during the fall of 2021. The forums were an opportunity for community members to review the County Health Profiles, discuss community needs, and prioritize perceived community needs in small break-out sessions, followed with a vote by participants.

The table below reflects the results of the vote by forum participants to identify the top health priorities in each county. Bolded priorities are those that were selected for each hospital to focus on for the following three years.

Table 2: Top Health Priorities Identified in the 2022 CHNA Forums

<u>Androscoggin County</u> Central Maine Medical Center		<u>Cumberland County</u> Bridgton Hospital		<u>Oxford County</u> Rumford Hospital	
Priority Area	% of Votes	Priority Area	% of Votes	Priority Area	% of Votes
Mental Health	97%	Mental Health	51%	Mental Health	58%
Social Determinants of Health	62%	Social Determinants of Health	42%	Access to Care	49%
Substance & Alcohol Use	51%	Access to Care	41%	Substance & Alcohol Use	42%
Access to Care	45%	Substance & Alcohol Use	34%	Social Determinants of Health	38%

To view all three CMH Community Health Improvement Plans for 2023-2025, see: www.cmhc.org/about-us/community-benefits/

Community Health Improvement Plans

To accompany the Maine Shared CHNA, each hospital develops a CHIP to address the chosen health priorities. The plans are not intended to be a comprehensive catalog of the many ways the needs of the community are addressed by each hospital, but rather a selection of specific actions that each hospital commits to undertake and monitor to address selected priorities. Following further discussion during plan development with hospital leadership regarding overall system goals, a third system-wide priority was identified to address Diversity, Equity, Inclusion, and Belonging (DEIB) in all three hospital regions and service areas.

Progress Update for Year 3 Activities

Priority 1: Mental Health

Goals

- Bridgton Hospital: Increase awareness of mental health challenges and improve access to mental health resources in the hospital service area.
- CMMC: Expand capacity to address mental health needs.

Strategy to achieve the goals

- Bridgton Hospital: Support community partners providing education, resources, and prevention of mental health.
- CMMC: Develop a vision and strategic plan that addresses gaps and opportunities with a focus on marginalized communities, and increase the use of Intentional Peer Support (IPS) Specialists in the Emergency Department (ED).

Partners engaged on priority

- Bridgton Hospital
 - Lakes Region Recovery Center
 - Town of Bridgton
 - National Council for Mental Wellbeing – Youth Mental Health First Aid (YMHFA)
- CMMC
 - St. Mary's Hospital
 - Sweetser
 - Community Credit Union
 - Spurwink
 - Center for Wisdom's Women
 - Community Concepts Inc.

Highlights

- Bridgton Hospital
 - Attended the Lakes Region Recovery Center's Mental Health Awareness Walk on May 21, 2025 with team members; approximately 50 people participated.
 - Attended a comprehensive plan meeting for the Town of Bridgton to discuss community topics like mental health on July 31, 2024.
 - Maintained YMHFA instructor certification to provide future trainings.
- CMMC
 - Continued work with IPS staff at Sweetser to improve awareness and understanding among ED team members; updated and distributed awareness raising materials about program availability.
 - 264 IPS contacts were made with patients in the ED.
 - Vision and plan completed for the Behavioral Health Committee.
- System-wide
 - Compiled a collection of resources and training opportunities for team members

Next steps

- Bridgton Hospital
 - Continue to support community efforts addressing mental health, as well as provide future trainings on mental health.
- CMMC
 - Continue to support community organizations that address mental health, provide resources and educational opportunities, and increase awareness of mental health among team members.

Priority 2: Substance Use Disorder (SUD)

Goals

- Rumford Hospital: Increase awareness and education of treatment and access to resources for SUD within hospital service area.
- Bridgton Hospital: Increase awareness and education of treatment and access to resources for SUD within hospital service area.
- CMMC: Improve access to resources for SUD services.

Strategy to achieve the goals

- Rumford Hospital: Maintain and expand connections to community organizations addressing SUD.
- Bridgton Hospital: Maintain and expand connections to community organizations addressing SUD.
- CMMC: Support community partners providing education, resources, and prevention of SUD and increase awareness of Naloxone availability.

Partners engaged on priority

- Rumford Hospital
 - Western Maine Addiction Recovery Initiative (WMARI)
 - River Valley Recovers Strong
- Bridgton Hospital
 - Lakes Region Recovery Center
 - The Opportunity Alliance
 - Cumberland County Public Health Department
- CMMC
 - St Mary's Hospital
 - Spurwink
 - MaineGeneral Health
 - Portland Public Health
 - Black Poster Project

Highlights

- Rumford Hospital
 - Supported the planning of WMARI's Recovery Rally and Basics of Substance Use Conference.
 - Supported the planning of River Valley Recovers Strong's Community Block Party.
- Bridgton Hospital
 - Attended the Lakes Region Recovery Center's Recovery Rally on September 14, 2024 with team members; approximately 100 people attended.
 - Discussed the Community Care Team project with Cumberland County Public Health Department and The Opportunity Alliance.
- CMMC
 - Participated in planning and tabled at the Lewiston Rally for Recovery on September 14, 2024.
 - Supported the Black Poster Project, an awareness raising event for substance use disorder and overdose, held on April 12, 2025.
 - Planned the logistics for a system-wide Naloxone Distribution Program; created onboarding documents, held four trainings led by MaineGeneral between August and December, 2024, and onboarded 28 team members from 16 departments/practices.

- Supported the Medication Take Back Days on October 26, 2024 with 852 pounds collected and April 26, 2025 with 608.5 pounds collected across Androscoggin County.
- System-wide
 - Completed two rounds of updates to the Community Resource Database and the printable guides in January and June. Further details of this activity can be found on page 10.

Next steps

- Rumford Hospital
 - Continue to support community efforts addressing SUD.
- Bridgton Hospital
 - Continue to support community efforts addressing SUD, including the Lakes Region Recovery Center's future recovery rallies.
- CMMC
 - Increase awareness among team members of SUD, impact of stigma, and recovery.
 - Work to increase communication and collaboration between service providers, and support work around harm reduction.
 - Continue to support the system-wide Naloxone Distribution efforts.

Priority 3: Social Determinants of Health (Rumford Hospital Only)

Goals

- Improve the integration of Adverse Childhood Experiences (ACEs) and food insecurity supports in the Rumford Hospital service area.

Strategy to achieve the goals

- Resume ACEs trainings for team members, create Rumford Hospital Community Events calendar to promote belonging, and maintain and expand connections to organizations addressing ACEs in the area.

Partners engaged on priority

- Oxford County Wellness Collaborative
- River Valley Healthy Communities Coalition/Old School Food Pantry

Highlights

- Hosted a food drive for the Old School Food Pantry during May 2025 and collected six tote bags of food items to donate.
- Proposed the promotion of an ACEs prevention training from the U.S. Centers for Disease Control and Prevention to clinical team members through the clinical education department and created a promotional flyer to be utilized.
- Supported the local Yellow Tulip Hope Garden Project by placing promotional signs near the Hope Gardens located on hospital grounds.

Next steps

- Rumford Hospital will continue to support the Old School Food Pantry through annual food drives, as well as continue to support the local Yellow Tulip Project initiative.

Priority 4: Diversity, Equity, Inclusion, and Belonging (DEIB)

Goals

- Improve health outcomes for populations experiencing health disparities.

Strategy to achieve the goals

- Convene a team to develop a plan to address DEIB, solidify partnerships with community allies, and increase awareness of DEIB activities and progress.

Partners engaged on priority

- Lewiston Adult Education
- Auburn Adult Education
- Pinetree Institute

Highlights

- Two subcommittees were formed: LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer) and Recovery Friendly Workplace.
- A four-part learning series on substance use disorder, recovery, and support at work was held January-April, 2025 through Noon Knowledge sessions to team members, with 30-50 attendees per session.
- To build inclusive care, LGBTQ education modules were curated on Health Stream and made available to clinical and non-clinical team members.
- In partnership with Lewiston and Auburn Adult Education, a 6-month program that pairs English language development with healthcare skills training was offered. Nine of the graduates were hired by CMH as Certified Nursing Assistants.
- Partnered with Lewiston and Auburn Adult Education to provide English classes to 12 Environmental Services team members.
- CMH has completed professional translations of all core benefits documents used during orientation for new team members into four priority languages: Portuguese, French, Lingala, and Somali.
- The Recovery Friendly Workplace Subcommittee authors a monthly article in OnPoint.
- Resource flyer with a QR code providing access to local, state, and national substance use resources was created and distributed.

Next steps

- Monthly OnPoint articles will expand to include additional topics associated with health equity.
- Pilot bystander trainings for team members to address discrimination and abuse by both patients and team members.
- Expand stigma trainings and substance use learning series through additional Noon Knowledge sessions.
- Continue partnership with Lewiston and Auburn Adult Education.

The 2025 Maine Shared Community Health Needs Assessment

Fiscal Year 2025 included some of the 2025 Maine Shared CHNA process components. This cycle saw the addition of a new partner: Maine Community Action Partnership (MeCAP). MeCAP agencies conduct their own needs assessment on 3-year cycles, so to expand the reach and avoid duplication, the decision was made to merge efforts and have them join the Maine Shared CHNA. This cycle, data was collected through a statewide community survey of 3,967 valid responses, six statewide focus groups with 31 participants and county-wide focus groups in each county, 25 key informant interviews, and county-wide stakeholder forums.

To ensure that balanced and diverse input was collected at county-wide forums, stakeholders from a variety of sectors were invited to participate. County specific forums representing the CMH service area were held on the following dates:

- Oxford County: September 25, 2024 with 35 participants
- Cumberland County – Lakes Region: October 1, 2024 with 22 participants
- Androscoggin County: November 7, 2024 with 42 participants

[Community Engagement Overviews](#) are available and offer a detailed explanation of the 2025 Maine Shared CHNA process.

A new priority selection process was utilized in the 2025 Maine Shared CHNA, which grouped priorities into three different buckets. Community Conditions includes the physical, economic/work, social, and service environments. Protective & Risk Factors includes aspects of a person or environment that make it less likely (protective) or more likely (risk) that someone will experience a given condition. Health Conditions & Outcomes includes the state of a person’s health and well-being either as a current disease state, one that has been experienced, or the category of injury and death.

The table below outlines the top priorities from the county-wide stakeholder forums in each of the three buckets. Bolded priorities were selected for the 2026-2028 CHIPs.

Table 3: Top Health Priorities Identified in the 2025 CHNA Forums

	Oxford County	Cumberland County (Lakes Region)	Androscoggin County
Community Conditions	Housing Poverty Provider Availability	Transportation Poverty Housing	Housing Provider Availability Poverty
Protective & Risk Factors	ACEs Illicit Drug Use Youth Mattering	Community Mattering ACEs Substance Use	ACEs Nutrition <u>2-way Tie</u> : Illicit Drug Use, Adult Screening & Preventative Visits
Health Conditions & Outcomes	Mental Health Substance Use Related Injury & Death Obesity/Weight Status	Mental Health Substance Use Related Injury & Death Cardiovascular Disease	Mental Health Substance Use Cardiovascular Disease

To view final 2026-2028 CHIPs for each hospital, visit: www.cmhc.org/about-us/community-benefits/

Addressing the Social Determinants of Health

[Healthy People 2030](#) defines Social Determinants of Health (SDOH) as “the conditions and environments in which people are born, live, learn, work, play, worship, and age. SDOH affect a wide range of health, functioning, and quality of life outcomes and risks. SDOH represent nonmedical factors – like housing, transportation and poverty – that affect health. Differences in these conditions may put people at risk for poor health outcomes.”

Central Maine Healthcare understands that if we are truly to become a place where everyone has a chance to thrive, it is important to address the social determinants of health in our communities. Unstable housing, not having consistent access to nutritious foods, living in poverty, and lack of transportation have significant impacts on our communities and they are consistently found to be top priorities in the Maine Shared CHNA process. We see every day how difficult it can be for patients to focus on health when their most basic needs are not being met and there are multiple barriers to care. To move the needle on health inequity and improve health outcomes, we need to address what’s driving the longstanding disparities in health and health care, and be intentional about making changes to our whole system.

Community Resource Database

To respond to a need expressed by the CMH Care Management Department, a community resource database was created. This database is available online on the CMH team member portal, and includes resources in all three of the major hospital service areas: Bridgton/Lakes Region, Lewiston/Auburn, and Rumford/River Valley, as well as the Topsham region, and statewide resources. The purpose of the database is to be used as a tool for team members to better support patient needs with a large array of resources. It includes categories such as behavioral health, substance use, housing, food, and personal safety.

Table 4: Community Resource Database Usage for FY25

# Community Resources	# Resource Categories	# Regions Covered	# Page Visits
204	10	4	408

Hunger Vital Signs

In collaboration with Good Shepherd Food Bank, CMH implemented an innovative evidence-based program, Hunger Vital Signs (HVS), to improve the health of food insecure Mainers. It uses a two-question screening tool that identifies individuals as food insecure based on their response to the following statements:

1. “Within the past 12 months, we were worried whether our food would run out before we got money to buy more” (often true, sometimes true, never true, don’t know or refused.)
2. “Within the past 12 months, the food we bought just didn’t last and we didn’t have money to get more” (often true, sometimes true, never true, don’t know or refused.)

If a patient answers “sometimes true” or “often true” to one or both of the questions, they are identified as being food insecure. These patients are offered a 10-pound bag of non-perishable foods and a community resource guide containing information about food pantries in their area.

Table 5: Hunger Vital Signs Program Usage for FY25

# Food Insecurity Screenings Performed	# Food Insecure Patients (# Positive Screens)	# Community Food Pantry Lists Provided	# Food Bags Distributed	# Departments & Practices Onboarded
9904	972	597	751	10

Cribs for Kids

In recognizing the importance for all newborns to have access to a safe sleep environment, the CMMC Maternity Department participates in the Cribs for Kids Program, coordinated by the State of Maine. A safe sleep environment prevents suffocation and airway obstruction which can lead to Sudden Infant Death Syndrome and other sleep-related deaths. Whenever possible, patients are encouraged to obtain a crib prenatally, but those who cannot afford it are eligible for the Cribs for Kids program once they are admitted to the Maternity floor. A social worker will meet with the patients postpartum to review local resources and identify any residual needs. Eligible patients receive a Safe Sleep training provided by the social worker and a portable crib. In FY25, there were 114 cribs given out.

Car Seat Safety

CMMC partners with local organizations to provide free car seat safety inspections to families, and low-income families are eligible to receive free car seats. This program is supported by the Maine Bureau of Highway Safety, and through a grant from Toyota and the BuckleUp for Life Program. In FY25, there were 50 car seat safety inspections performed for families in the community.

Summary

The third and final year of the Community Health Improvement Plan is always busy. Health Promotion Coordinators are tasked with wrapping up activities from the current plan, while simultaneously developing the new plans and activities. The benefit to this overlap is that early planning for the next cycle includes a deeper understanding of the impact of different experiences and lessons learned from the current cycle.

One of the key insights utilized during the creation of 2026-2028 plans is the importance of flexibility. All three plans experienced unexpected changes during implementation which underscored how important it is to leave flexibility within the goals, strategies, and activities. This fiscal year also saw an increase in activities shared on two – or all three – plans. This resulted in more coordinated, system-wide efforts between both Health Promotion Coordinators, with highlights and accomplishments felt at more than one hospital.

Finally, the impact of community partnerships in each community cannot be overstated. These partners continuously help drive activities forward and are the true experts when it comes to staying aware of emerging community needs and efforts. This speaks to why community collaboration is prioritized in the 2026-2028 plans. While reflecting on the successes and challenges of the 2023-2025 cycle, both Health Promotion Coordinators recognized that all of their experience and knowledge from the implementation of these plans will only serve to strengthen and simplify their future efforts for the 2026-2028 plans.