The New London Hospital Association, Inc. 2015 CHNA Implementation Plan



A Dartmouth-Hitchcock Affiliate

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Introduction

The purpose of the following Community Health Needs Assessment (CHNA) Implementation Plan is to describe how The New London Hospital Association, Inc. (NLHA) uses and plans to use its resources to address community health needs and to meet the requirement of the Patient Protection and Affordable Care Act of 2009, which requires not-for-profit hospitals to develop and act on a recorded CHNA Implementation Plan (CHIP). Community Health Needs are identified through community surveys, focus groups, key informant interviews and objective data gathered from state and federal registries. The CHIP aligns with what is reported on the Federal IRS Form 990 Schedule H, *Hospitals* community benefit tax filing to demonstrate how not-for-profit hospitals meet their charitable mission.

In the second quarter of 2015, NLHA conducted a CHNA. The results of that assessment, along with demographic data and health status indicators from state and federal resources, identified priority community health concerns. There is much in common with the 2012 Community Health Needs Assessment, however it is notable that access to mental health care, not listed along the "top 10" 2012 concerns, features prominently in 2015, and alcohol and drug misuse also received increased emphasis. Access to dental health care appears newly as a top need in 2015, as does transportation.

The following CHIP identifies the support NLHA provides to our community. Where we do not take a lead role, we participate with our community partners to support their work, understanding a coordination of efforts is required to make an impact on the complex social issues we face. Our collective effort is our best strategy to move toward improved health and well-being.



Understanding the Geographic Area We Serve

NLHA serves 15 towns in the Lake Sunapee region of New Hampshire with a resident population of nearly 33,000 people. Our service area includes portions of both Merrimack and Sullivan Counties. Sullivan County is federally-designated as "medically underserved"— defined as "Residents have a shortage of personal health services (factors used in determining designation include: percent of population with income below poverty level; percent of population age 65 and older; infant mortality rate; and the computed ratio of full-time equivalent primary care physicians per thousand population)." There is significant economic diversity among these 15 communities, with nine reporting median household income above the New Hampshire figure of \$64,916, and six service area towns having median household income below that figure. The percent of children in poverty (using the definition of those under age 18 living below 200% of the Federal Poverty Level) in the overall service area is 26.4%, slightly less than the statewide measure of 27.2%. 22% of families in the service area are in this category. Reported alcohol use by high school age youth is higher than the state average. The area is substantially older than the state average of 14.2% over age 65, at 18.5%. This aging population plays a major role in shaping the delivery and cost of healthcare services both today and into the future. Likely related to age, the percentage of the area's population with at least one functional disability (13%) exceeds the state rate. (Figures from US Census Bureau.)

Addressing Community Needs

- The following priorities were identified as top concerns in the 2015 CHNA and are addressed by NLHA in the 2015 CHIP:
 - o Access to Mental Health Care
 - o Alcohol and Drug Misuse Including Heroin and Misuse of Pain Medications
 - o Access to Enough and Affordable Health Insurance; Cost of Prescription Drugs
 - o Lack of Physical Activity; Need for Recreational Activities, Active Living
 - o Poor Nutrition/Unhealthy Food
 - o Health Care for Seniors
 - o Income, Poverty and Family Stress (from the standpoint of low income as a barrier to access to care)
- Although related to various identified priority needs, the following areas did not come forward specifically in the CHNA, but NLHA supports these vital services, and their impact and anticipated outcomes are also addressed in the 2015 CHIP:
 - o Assistance with Care Coordination and Health System Navigation
 - o Emergency Preparedness
 - Wellness Promotion and Disease Prevention (related to Active Living and Nutrition concerns listed above)
 - o Health Professions Education and Training
 - o Community Building/Financial Contributions
- While the 2015 CHIP comments on these needs, the following identified in the 2015 CHNA as priority concerns are not extensively addressed by NLHA because to date they have fallen outside our mission:
 - o Access to Dental Health Care
 - o Transportation



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Access to Health Care Services (Primary, Specialty Medical, Mental Health & Dental Services)

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
Financial counseling, assistance to enroll in NHHPP (expanded Medicare) or Health Insurance Marketplace Subsidy to NLH Medical Group Sullivan County Grant— maternal and child low-income services at Newport Health Center	100 encounters Primary care recognizes an annual financial loss 93 patients, 478 encounters	Similar to FY15 Continue subsidy Continue, with change that includes SBIRT drug addiction prevention srvcs	 FY16 Plan Continue work of Patient Financial Services to help enroll community members in the Health Insurance Marketplace, as well as to provide assistance in obtaining expanded Medicare and offering general financial counseling Continue subsidy to primary and specialty care practices in New London and Newport Recruit primary and specialty care providers, pursuing new connection with regional medical school Continue to provide office space at Newport Health Center at below market rate for Counseling Associates, and build expanded space into new
Tiger Treatment Center at Newport Middle High School— school-based primary care, plus immunization and concussion management programs	88 student visits	Similar to FY15	 Newport Health Center Pursue telehealth for both medical and behavioral needs Build oral health space into new Newport Health Center and seek partner for services Anticipated Impact
Access to mental health services in Newport, plans for expansion	Provision of rented office space in Newport Health Center	Continued provision of space, building additional for FY17 forward	 Improved access to medical and behavioral health care Improved access to early detection and prevention services Decrease number of unnecessary acute emergency room visits Continue workforce recruitment to assure ongoing availability of high quality providers
Extended hours— evening(s) and/or Saturdays	NL Pediatrics—840 visitis NL Med Practice— 568 visits Newport Health Center— 1,027 visits	Similar to FY15	 Improved access to preventive and acute oral health services
Physician services at Proctor Academy in Andover	2.5-3 hours per week in school year	Similar to FY15	



Access to Health Care Services (Continued) (Primary, Specialty Medical, Mental Health & Dental Services)

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
Part-time medical and psychiatric physician services at Colby-Sawyer College HRSA Telehealth Network	On-campus care for students Dr, S. Powell directing grant to	Similar to FY15 Continue—	 Plan to Evaluate Monitor health status indicators including rates of ED visits for behavioral health and ambulatory sensitive conditions (e.g. diabetes and asthma) Monitor percent of adult patient population without health insurance
Grant for psychology and medical Emergency Medical Services for Children Grant—pediatric	develop CREST Telehealth Network Dr. S. Powell Site Director, estimated 50 hrs	estiimated 50 hrs Dr. Powell Continue— estimated 50 hrs	 coverage Monitor percent of adult patients who have not seen a dentist in the past year Monitor percent of adult patient population without a personal doctor or
training for EMS workers HRSA Small Healthcare Provider Grant—teaching quality, Greenbelt, systems improvement at Newport Health Center	Dr. S. Powell Physician Liaison, estimated 50 hrs	Dr. Powell Continue— estimated 50 hrs Dr. Powell	 healthcare provider Monitor preventive health measures including percentage mammograms, colon cancer screening, immunization rates, depression screening, visits to dentists within the last year Monitor indicators for chronic disease including diabetes, heart disease, hypertension, asthma, overweight and obese
Rural Health Network Telepsych Development	Dr. S. Powell Primary Investigator, estimated 50 hrs	Continue— estimated 50 hrs Dr. Powell	
Paid advertising in free publications	Accessible service information	Similar to FY15	
Future access to oral health services—Space to be built for embedded oral health care at new Newport Health Center	N/A	Included in new building, with partner to be sought for FY17 forward	
Ongoing workforce recruitment/enhancement	Hired 3 PCPs, 1 ortho PA; added various DH providers; significant HR/other time	Similar to FY15	



Access to Affordable Health Insurance & Affordability of Medical Care and Prescriptions

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
Financial Assistance Counseling (Includes Health Insurance Marketplace Assistance)	100 encounters—see Access to Health Care Services	Similar to FY15	 FY16 Plan Continue to provide financial assistance counseling to review federal, state and community resources Provide Medication Bridge prescription medication assistance counseling
Medication Bridge Prescription Assistance	60 clients ordered prescriptions valued at \$80,000+24 hrs/wk staffing	Similar to FY15	 From the incurrent of the provided for the assistance counseling for free and low cost medication options Continue charity care to improve access to medical and preventative health services
Charity Care	\$1,014,000*	Continue to support community need	 Anticipated Outcomes Improved access to early detection and disease prevention services by
Bad Debt	\$1,688,547*	Continue to support community need	 enrolling community members in Health Insurance through the marketplace Decrease number of unnecessary acute emergency room visits
Medicare costs exceeding reimbursement	\$992,700**	Continue to support community need	 Medication availability for those in need Improved access to medical and behavioral health care throughout service area, removing lack of ability to pay as a barrier to care
Medicaid costs exceeding reimbursement	\$767,516**	Continue to support community need	Note that, while not addressing causes of Income, Poverty and Family Stress or seeking to alleviate that set of needs, these efforts are meant to assure that care is available to all regardless of income or insurance.
			 Plan to Evaluate Monitor health status indicators including rates of ED visits for behavioral and ambulatory sensitive conditions (e.g. diabetes and asthma) Monitor values of charity care and bad debt, as indicators of increasing affactive incurance coverage
			 effective insurance coverage Monitor preventive health measures including percentages for mammograms, colon cancer screening, immunization rates Monitor indicators for chronic disease including for diabetes , heart disease, hypertension, asthma, depression, overweight and obese

*not yet audited **annualized estimate from FY14 results



Alcohol and Drug Abuse Prevention & Access to Treatment

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
Naloxone/Narcan kits deployed to Newport Health Center for distribution to patientsProvide SBIRT (Screening, Brief Intervention and Referral to Treatment) services for Mothers and for Children under age 18 at Newport Health CenterExplore and possibly implement expanded opioid 	One of first regional health clinics participating N/A N/A N/A Provision of Newport Health Center rented space Convenient community location at no charge	InvestmentContinuesupport andexpandprotocolsThru SullivanCounty Maternaland Child HealthGrantTBDSimilar to FY15Similar to FY15	 FY16 Plan Maintain, administer and prescribe naloxone/Narcan doses according to latest guidelines Regularly screen patients for opioid use Initiate SBIRT services at Newport Health Center through Sullivan County Grant Explore and implement expanded actions around growing opioid crisis, to potentially include community education, additional assessments, early intervention, other Continue to provide office space for Counseling Associates at Newport Health Center Continue to provide AA and Al-Anon meeting space Promote smoking cessation through Wellness Connection employer network Work with community partners to reduce unauthorized access to prescription drugs with drug take back programs Anticipated Impact Decrease number of drug and alcohol related acute emergency room visits Improved access to preventive and acute substance abuse services
			 Monitor substance abuse indicators including rates of ED visits for alcohol and substance abuse conditions Monitor drug and alcohol misuse status Maintain health status measures for smoking Monitor suicide rates



Assistance with Care Coordination & Health System Navigation

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
 Care Management for patients with high care needs: Improve access to healthcare Guide/educate to manage chronic conditions Patient counseling and support Refer to community supports: mental health counseling, dental services, meals on wheels, etc. Assist with arranging financial solutions Assist with access and administration of medication Assist with coordination of hospital discharge, including home care, nursing home and mental health care 	3 Social Workers and 2 Transitional Care Nurses who provide assistance as described	Similar to FY15	 FY16 Plan Continue subsidy to Care Management Expand service to provide care coordination for patients seen through the Emergency Department Anticipated Impact Improved transition from inpatient to home setting Improved access to early detection and disease prevention services Improvement in disease management and prevention leading to decrease in number of unnecessary acute emergency room visits Improved access to medication and coordination of medication for those in need Improved access to needed community support services Plan to Evaluate Monitor percent of adult population without a personal doctor or healthcare provider Monitor preventive health measures including percentages for mammograms, colon cancer screening, immunization rates, depression screening Monitor indicators for improved outcomes for chronic disease including for
Gas cards and taxi vouchers for transportation to/from medical services	40+ encounters	Similar to FY15	 Monitor indicators for improved outcomes for chronic disease including for diabetes , heart disease, hypertension, asthma, overweight and obese Monitor number of patients supported by Care Management program
Chose current site as location of new Newport Health Center, being on public transportation route	Plans to rebuild on current site	Rebuild on current site	



Emergency Readiness & Response

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
New London Ambulance	1,702 ambulance responses	Similar to FY15	FY16 Plan
Service—services to 7 towns			Continue any necessary subsidy to ambulance service to assure
Regional EMS Conference	150 attendees	Similar to FY15	emergency transport access
CPR Program and EMS	29 community students	Similar to FY15	Invest in additional ambulance equipment and staff
Continuing Education			Addition of Mt. Sunapee Resort to ambulance contract and entirety of town
Emergency Operations Center	Staff representative	Similar to FY15	of Sunapee
with Town of New London			In partnership with local EMS system continue training to assure skill of
Town Dispatch Committee	Staff representative	Similar to FY15	community first response
Greater Sullivan County Public	Staff representative	Similar to FY15	Continue participations with Town of New London, Greater Sullivan County
Health Region Emergency			Public Health Region and District C-5 to assure coordinated community
Preparedness			emergency responses
C5 Emergency Medical Services District	Staff representative	Similar to FY15	Continue strategies for emergency public information, warning and response
Staff support for emergency	Coordination of region- wide	Similar to FY15	rooponoo
preparedness community drills	emergency response drills		Anticipated Impact
			Maintain excellence in 911 readiness for towns served and have ability to provide mutual aid in the region as needed
			Ensure timely and effective communication and integrated emergency response
			Plan to Evaluate
			Review of ambulance statistics
			Post-incident debriefings



Wellness Promotion & Disease Prevention

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
Health Promotion and Disease	750+ encounters	Similar to FY15	FY16 Plan
Prevention through Education,			Continue to provide programming to address health risk behaviors,
Programs, Fairs on:			providing sessions for all ages in sites throughout service area
Active living Advense are directives			 Ohler Lecture on palliative care and hospice in response to community need and interest
 Advance care directives and POLST 			 Continue breast and cervical cancer screening initiatives
Back pain			 Promote other screening and early detection through programs and
 Breast cancer detection 			publications
 Cancer research (Relay 			 Provide chronic disease self-management education and programs
for Life team)			 Continue work with community partners and provide leadership for The
Diabetes care			Wellness Connection and its educational components, with emphasis on
Nutrition and weight			health eating and active living
management			Continue Fit for Life program of physical activity for students, to also
Ohler Lecture—			include nutrition education and activities
Mediterranean Diet			
Osteoarthritis			Anticipated Outcomes
prevention/care			Improved health status indicators
Safe Sitter		Diama in a famous	Continued participation in community programs, trainings and screenings
Breast and cervical cancer	65 patients received free or reduced rate BCCP	Planning for up to 105 BCCP	Non-athlete students have guided physical activity outside of school
prevention and early detection (participation in NH Breast and	screenings	patients	Plan to Evaluate
Cervical Cancer Program)	Serverings	patients	 Track health status measures including measures of obesity and
Fit for Life for Newport Middle	82 students	Similar to FY15	overweight
High School students			Monitor health status indicators including rates of ED visits for ambulatory
Exploring CCRC potential for	Discussions with interested	Unknown	sensitive conditions (e.g. diabetes and asthma)
senior residences on land	third party, consideration of		Monitor community rates of chronic disease including diabetes , heart
owned adjacent to hospital,	other community resources		disease, hypertension
with new emphasis on srvces			Track percent of deaths due to breast or cervical cancer
supporting aging in place			Track participation in Fit for Life



Wellness Promotion & Disease Prevention (Continued)

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
The Wellness Connection community health initiative, directed by NLH staff member, with emphasis on healthy eating and active living	Invested 90% staffer salary/benefits plus other expenses to: Develop employer network, with CDC Worksite Wellness Scorecard completed by 19 employers to assess wellness programs/policies and provide recommendation Conduct Needs & Interest survey—sent to over 1,600 employees, with 599 respondents Conduct community health education programs and participate in health fairs, in conjunction with Community Relations Department Make first round of 4 mini- grants for healthy eating and/or active living; \$3,717 granted	Similar to FY15	 FY16 Plan Possibly continue developing employer network Continue to offer wellness education and activities in community Continue mini-grant program Anticipated Outcomes Improved health status indicators Making healthy choices becomes easier throughout community Plan to Evaluate Track health status measures in employer network, including measures of obesity and overweight, with prior surveys providing baselines Collect evaluations and assessments from education session attendees



Health Professions Education—Workforce Enhancement

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
Coordination of clinical placement and provision of supervision for health profession students including nursing, pharmacy, medical assistants, APRN, PA, Physical/Occupational Therapists, Laboratory, Dadialogy, Quality, etc.	Provided clinical placement and preceptors for 122 students	Similar to FY15	 FY16 Plan Continue to serve as a training site for health care students in areas listed Continue Caring Student Intern program to provide an opportunity for local high school students to experience professional health care setting firsthand Pursue providing clinical rotations for students from medical school in region Periodically partner with local non-healthcare students to help meet their
Radiology, Quality, etc. Job shadow and career awareness Participation with Colby- Sawyer College in community	Hosted 6 high school students interested in healthcare careers with Caring Student Intern Program Provided required internship placement for one college	Similar to FY15 Similar to FY15	 academic internship needs, as a community workforce participant Anticipated Impact Influence availability of quality health care professionals in the future Help assure supply of health care providers in community Invest in local workforce for today and tomorrow Plan to Evaluate
support of student practicum requirement	student (n non-healthcare field)		 Follow state and national trends for health care provider shortages Require student evaluations of their placements/programs



Community Building & Financial Contributions

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
 NLHA works with diverse community partners to promote and protect the health of our community. Our role is not to simply treat illness, but to join with partners to prevent illness and injury and support those organizations that make our community a healthy place to live. The "give back" in the category is not always quantifiable. The people of NLHA share their expertise and energy with many partners dedicated to the social, mental and physical health of our community. Active participation in Boards of Directors, Committee work and program activities in 2015 include but are not limited to: American Association of Healthcare Administrative Management American Hemophilia and Thrombosis Network American Heart Association American Red Cross Association of Fundraising Professionals Crotched Mountain Rehabilitation Center Healthcare Financial Mgmt Assoc KLS Community Food Pantry Lake Sunapee Region Chamber of Commerce 	Strengthening of economic and social welfare of communities we serve Strengthening of the public health infrastructure Improvement in access to healthy foods and opportunity for physical activity Support of disease prevention and research	Similar to FY15	 FY 16 Plan Continued involvement with community partners to support and improve the health and well-being of our community Anticipated Outcomes Improved social and economic conditions as well as improved well-being for the regions we serve Plan to Evaluate Survey of participants indicating how their participation benefits communities



Community Building & Financial Contributions (Continued)

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
 Continued from page 12 Mid Vermont School New England Association of Directors of Healthcare Volunteer Services New England Life Care NH Association for Rehabilitation Administrators NH Falls Prevention Task Force NH Health Plan NH Society of Health System Pharmacists NH/VT Assoc of Healthcare Volunteer Services New London Area Clergy Association and Ecumenical Services New London Rotary Open Hands Mission Upper Valley Hostel 	See above.	See above.	See above.
 Free use of meeting space for: Adventures in Learning Al-Anon Alcoholics Anonymous C5 New England Caring Student Intern CHNA Leadership Training CME CPR Training EMS Training Greater Sullivan County Infection Control NH/VT Assoc of Volunteer Supervisors 	Strengthening of economic and social welfare of communities we serve Strengthening of the public health infrastructure Support of disease prevention and treatment	Similar to FY15	



Community Building & Financial Contributions (Continued)

NLHA Response	FY15 Investment and Outcomes	Anticipated FY16 Investment	FY16 Plan — Anticipated Impact — Plan to Evaluate
 Continued from page 13 New London Rotary Relay for LifeAmerican Cancer Society Safe Sitter Vital Communities Wellness Education 	See above.	See above.	See above.
 Direct monetary contributions in support of health-related community activities: American Cancer Society American Heart Association Mt. Sunapee Area Ski Club NEHSA New London Rotary Club health career scholarship Sutton Athletic Fields Turning Points Network Wilmot Community Association 	Donations of \$6,475	Similar to FY15	

