



New London Hospital
Dartmouth-Hitchcock

The New London Hospital Association, Inc.
2018-2020 CHNA Implementation Plan

INTRODUCTION

The purpose of the following Community Health Implementation Plan (CHIP) is to describe how New London Hospital Association, Inc. (NLHA) will improve the health of the community through investments in community-based population health strategies in the communities it serves in our 15 town service area in the Lake Sunapee Region; how these investments align with identified community health needs; and what broad outcome goals NLH is striving to achieve through these investments.

This document also serves as a compliance need. The Patient Protection and Affordable Care Act of 2009 require not-for-profit hospitals to develop and act on a recorded 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 2018, 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. Affordable health insurance, access to mental health services, cost of prescription drugs and substance misuse prevention, treatment and recovery are each top priorities from prior community health needs assessments that remain among the highest priorities. Child abuse or neglect and domestic violence are two high priorities not specifically identified in prior needs assessments, although ‘strengthening and supporting families’ is a related topic that was previously identified as a high priority for community health improvement efforts. Other new priorities identified in the community survey are prevention and treatment of cancer and access to home health care and hospice services.

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. Our Community Health Assessment Partners were: Dartmouth Hitchcock, Valley Regional Hospital, Mt. Ascutney Hospital and Health Center and Visiting Nurse and Hospice for VT and NH.

IDENTIFIED 2018 CHNA PRIORITY NEEDS

FY 2018 CHNA Identified Priority Areas	Community Survey Priority Rank	Page
Affordable health insurance	1	4
Access to mental health care services	2	6
Cost of prescription drugs	3	4
Prevention of substance misuse and addiction	4	7
Access to substance misuse treatment and recovery services	5	7
Availability of Primary Care Services	6	8
Health Care for Seniors	7	9
Child Abuse and Neglect	8	10
Prevention and treatment of cancer	9	11
Domestic Abuse	10	10
Access to home health care and hospice services	11	9
<p>Although related to various identified priority needs, the following areas did not come forward specifically in the CHNA, but NLHA supports these vital services in the community. The strategy, investment, measure and target for each area are also addressed in the 2018 CHIP.</p>		
Healthy Eating and Active Living		12
Community Building and Support		14
<p>While the following areas were identified as a top ten priority in the 2015 CHNA. These specific priorities did not come forward as a top priority area in the 2018 CHNA and were replaced by cancer prevention, child abuse and neglect and domestic abuse.</p>		
Lack of physical activity; need for recreational opportunities, active living		
Poor nutrition / unhealthy food		
Transportation		
Access to dental care		

CHNA 'Priority Area'	Current State Indicator (Population or Other Data)	NLH Proposed Programs, Strategies, Actions to Address this Priority	Anticipated Investment in this program, strategy, action <cash, indirect, expertise, etc>	Program, Strategy, Action Measure (how much, how well)	Program, Strategy, Action Measure Target
Access to affordable health insurance, health care services and prescription drugs	The estimated proportion of people with no health insurance has declined in the NLH service area from 10.6% in the last community health assessment to 8.1%; a proportion similar to the overall uninsurance rate estimated for NH (8.4%)	Continue financial counseling to assist community members in the Health Insurance Marketplace, Medicare and general financial counseling.	4 trained counselors on staff	#Patient encounters	100 per year
		Support Tiger Treatment Center at Newport Middle High School	2 Providers on-site at NMHS from 8-9AM Monday-Friday	#Student Visits	100 per year
		Support Medical (at CSC) and Psychiatric (at NLH) Physician services for Colby-Sawyer College Students	2 Providers – PT	#Student Visits	
		Provide Medication Bridge assistance counseling at Newport Health Center for free or low cost medication options.	24 hrs./week staffing	#Patient encounters	370
		Provide Medication Assistance information in Emergency Dept. in New London	Pamphlets and Monitors		
		Continue providing health services to patients with low – income (Charity Care)*	\$476,863.00		
		Medicaid Costs exceeding reimbursement*	\$1,640,835.00		
		Provide Gas Cards to/from medical services	\$200.00 + per year	#Gas cards distributed	
			Support Care Management services for patients with high care needs	Expertise: Director of Care Management, plus team of 7 staff members	

		Access to services: Financial Counseling, Medication Assistance, Coordination of Care (home, skilled, assisted, mental health) – inpatient			
		Support Transitional Care Nurses in both New London and Newport	2 RN's		
		Expand of Care Management services to Emergency Department	Expertise		

*Schedule H (form 990) for year ending 6/30/17

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Access to Mental Health Care Services	Suicide deaths per 100,000 people; any cause or mechanism is 17.4 compared to 15.3 (NH overall)	Support FREE NAMI Connect Suicide Prevention Training classes in region	Certified on-site Instructor in NAMI Connect Suicide Prevention Training. Classes to be held in NLH service area.	# Classes #Attendees	A minimum of 2 classes per year
	About 10% of adults in the service area report 14 or more days in the past 30 days when their mental health was not good, a measure that is correlated with depression and other chronic mental health concerns as well as overall health-related quality of life	Provide Full-time psychiatric coverage in New London (2 days) and Newport (3 days), as well as, ED – Call Service	Staff	#Patients visits	
		Provide leased Space at Newport Health Center, Mon-Fri for Patient Counseling Services	Counseling Associates of New London		
		Explore hosting a family support group in region for Substance Use Disorder and Mental Health	Possible meeting space	#meetings per year	12
		Contract with D-H tele-psychiatry for inpatient and emergency department patients		#encounters	

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Substance misuse prevention, and access to treatment and recovery	16% of adults in the service area reported binge drinking in the past 30 days including 21% of adult males	Collaboration with D-H to support a Substance Misuse Prevention Coordinator in region	Office space 1 day per week in New London		
		Support 1115 Waiver Work / IDN Pediatric Project: 0-3 Recovery Friendly Peds at NHC	Staff		
		Provide for AA meeting on-site in New London	Meeting Space	# Meetings	52
		Support Education and Distribution of Naloxone/Narcan Kits	Kits / NHC Staff and Emergency Management Staff		
		Conduct SBIRT Screenings: Screening, Brief Intervention, and Referral to Treatment (SBIRT) is an evidence-based practice used to identify, reduce, and prevent problematic use, abuse, and dependence on alcohol and illicit drugs. The SBIRT model was incited by an Institute of Medicine recommendation that called for community-based screening for health risk behaviors, including substance use.	NHC Staff ED Staff		

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Availability of Primary Care Services	Current Provider panels in New London and Newport are open and have capacity for new patients.	Increase awareness of services and availability including primary care services at New London Hospital. Strategy is to incorporate more direct platforms, geo-targeted marketing, and calls to action. Plan calls for more initiatives which incorporate more accurate measurables such as direct mailers, Search Engine Optimization and Search Engine Marketing.		Increase number of new patients in primary care provider panels	
	86.5% of adults in the service area report having a personal doctor or health care provider, a proportion similar to NH overall, as is the rate of hospital stays for ambulatory care sensitive conditions for Medicare enrollees (43.3 per 1,000)	Upgrade New London Hospital website to allow for improved patient experience. New site will be mobile-friendly allowing for more engaged users and enhanced digital marketing strategies, thus reaching more families seeking primary care services.			
		Support Evening 2 nights per week in Newport and 1 night per week in New London and Weekends (Pediatric) hours			
		Explore team based care model in Medical Group			

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Senior Services including healthcare, assisted living, long term care, home health care and hospice services	The service area population has a substantially higher proportion of seniors (22.9% are 65+) compared to NH overall (15.8%)	Implement Integrated Mobile Health model to include home visit day of discharge: home safety check, falls assessment, medication management and liaison to community resources.	Vehicle Expertise (EMT's)	#home visits	
		Support Evidence Based Fall-Prevention Programs: Expansion of MOB and TJQ Programs to include additional trainers and additional community classes	2 staff - trained TJQ Instructors	#Classes per year	
		Revisit Pilot Auto Referral system from emergency department to rehab department for Falls Assessment	Expertise	#Referrals from emergency department	100 referrals
		Explore a collaborative extension of clinical services to local nursing homes, home care, hospice/ palliative care			
		Collaborate on the development of a Senior Living Community (SLC) in the New London Area			

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Family Strengthening including domestic violence and childhood trauma	About 22% of children in the NLH service area live in households with incomes below 200% of the federal poverty level Among respondents age 18-44 years or older, 'child abuse or neglect' was reported as a higher priority (relatively) than other age groups	Develop NLH staff/provider education programming on local resources, partners, referrals	NLHA Staff Time		
		Research and implement Stress Reduction Programming in Community	NLHA Staff Time		
		Explore Patient Screening during primary care visit and emergency department visit			
		Expand Patient Education and Information on local resources (Crisis Center, Concord, NH and TPN)	Rack in ED		
		Support employment strategies to address socio-economic needs: Staff participation in Project Search Board, CSC /KRHS student preparation programs	NLHA Staff Time		
		Partner with School Nurses to promote community resources – Provide education and resource materials	NLHA Staff Time		
		Explore feasibility of office space 1 day per week for TLC Family Resources Center to expand services in New London community and surrounding towns	Office Space		
		Develop tip sheet and training for in-home health care workers (LSR-VNA)	NLHA Staff Time		
		Explore partnering with D-H Community Health Workers in the region			

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Prevention and Treatment for Cancer	Cancer incidence per 100,000 people, age adjusted for breast (female) is 159.4 compared to NH overall (145.3)	<p>Collaboration with D-H to host a unique 3-day retreat program for patients that will combine breast cancer education and peer support with the therapeutic sport of fly fishing. Casting for Recovery (CfR) serves women of all ages, in all stages of breast cancer treatment and recovery, at no cost to participants.</p> <p>Educate the community on 3-D Mammography and the newly mandated coverage in New Hampshire</p> <p>Partner with D-H Norris Cotton Cancer Center to research and implement education programming</p>	<p>NLHA Trained Staff (Wellness Director and Provider) to organize and lead the CfR retreat</p> <p>NLHA Staff Time</p>	CfR Retreat	1 retreat per year
	Cancer incidence per 100,000 people, age adjusted for melanoma of the skin is 55.6 compared to NH overall (29.7)	<p>Partner with D-H Norris Cotton Cancer Center to research and implement education programming</p> <p>Explore grants to purchase and install additional sunscreen dispensers in the Communities we serve</p> <p>Seek grant funding to prepare summer kit for school children: sunscreen and educational materials</p>	NLHA Staff Time to prepare, track and monitor grants		
		Partner with D-H Norris Cotton Cancer Center to research and implement education programming on Tobacco use (e-cigarettes and vaping)			

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<p>Access to Healthy Eating and Active Living programs and resources:</p> <p><i>Based on Behavioral Risk Survey, 2014/2015 combined, custom area estimates</i></p>	<p>Being in good or better health 85.5%/87% NH</p> <p>BMI in overweight or obese category 64%/63.6% NH</p>	Support a Know your numbers campaign utilizing the Higi Health Kiosk	Higi Health Kiosk on-site	#Visits to Kiosk	Average 15 per day
		Host and Manage HEAL Coalition: Wellness Connection Coalition	Leadership and expertise to manage and support Wellness Connection Coalition Efforts	# Collaborative Efforts	4
		Support multi-sector community health coalitions and public health networks	Serve on community health coalitions: GSCPHAC, HEAL-NH	#Coalitions	Varies Annually
		Support leadership of regional and statewide health and human services organizations	Support community health organizations through service on boards, work teams, and task forces: GCPAH, DH PCW Exec Board	#Boards, works teams and task forces	Varies Annually
	<p>Having been told they have diabetes 10.5%/8.6% NH</p>	Support a 12-month Diabetes Prevention Program	Diabetes Educator for year-long cohort FVRx Administration	#Participants	30
		Support Staff Representation on State of NH Diabetes Prevention Advisory Group	Staff Time	Attendance %	
		Collaborate with LSR-VNA to provide space for a Diabetes Support Group	Meeting Space at NHC	#Meetings	12

		Support Free Nutrition Education: HWWS, Cooking Matters, Cooking Classes	2 Dieticians – Part-time FVRx Administration	#Participants	100
		Support community partner: Vital Communities in the Power of Produce program	Providers	# POP Dollars Distributed to children	200
	No physical Activity in past 30 days 23.8%/20.8% NH	Partner with Town of New London and Colby Sawyer College to research, implement and support Bike Share Program in New London, NH Helmet Fundraiser/education event	NLHA staff Leadership and Coordination	#Rides	

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Community Partner Collaboration and Financial Contributions		Promote NLH Staff Participation on Statewide Boards of Directors and Committees	NLHA Staff Time	# Boards	25
		Provide and support Meeting Space for community partners	Meeting Space	# Events year	120
		Support of health-related community activities	Monetary Contributions		
		Support local community education efforts through attendance at local Wellness Fairs and community education programming	NLHA staff time	#Fairs year	4