



Community Health Improvement Plan Public Health Priorities 2020-2025

Aurora Drew, PhD



About the Region

The Greater Sullivan County Public Health Region is one of thirteen New Hampshire public health regions¹. This region includes the following fifteen rural towns and one city with a combined population of approximately 47,000 people²: Acworth, Charlestown, Claremont, Cornish, Croydon, Goshen, Langdon, Lempster, Newport, Springfield, Sunapee, and Unity in Sullivan County and Newbury, New London, Sutton, and Wilmot in Merrimack County. There are two community hospitals located in the region: Valley Regional Hospital on the western edge of the region in Claremont and New London Hospital in the eastern part of the region.

¹ <http://nhphn.org/greater-sullivan-county-regional-public-health-network/>

² <http://www.nh.gov/oep/data-center/census/index.htm>

Public Health Priorities

**SUBSTANCE MISUSE PREVENTION
AND REDUCTION**

EMERGENCY PREPAREDNESS

HEALTH & WELLNESS

STRENGTHENING FAMILIES

ACCESS TO CARE

HOUSING

TRANSPORTATION

In early 2020, the global coronavirus pandemic challenged public health systems everywhere. These priorities were selected before the pandemic struck our community. The need for improvements in these priority areas became more pressing during the pandemic response, which is ongoing as we develop this document and adapt to the challenges of COVID. We have also deepened our commitment to address regional racial disparities in our quest to promote health equity.

Funding for the Greater Sullivan County (GSC) Community Health Improvement Plan is provided by the New Hampshire Department of Health and Human Services. Dartmouth-Hitchcock is the fiscal agent for the Greater Sullivan County Public Health Network and supports the public health network with funding and administrative support. For more information about the regional public health network visit <http://gscphn.org> or email gscphn@hitchcock.org

Methods to Select Priorities

The Greater Sullivan County Public Health Advisory Council (PHAC) reviews regional public health priorities every three to five years after our regional hospitals and Visiting Nurse Associations (VNAs) complete their community health needs assessments, as required by federal policy.

The PHAC reviewed community health needs assessments from Valley Regional Hospital,³ New London Hospital,⁴ and the Lake Sunapee Region VNA & Hospice⁵ when developing these priorities. The most recent community health needs assessments were completed in 2018.

Additional data sources reviewed include the County Health Rankings⁶, NH Wisdom⁷, NH Social Vulnerability Index⁸, CDC Wonder⁹, and other data sources, as they became available. We also reviewed local program level data when it was available.

The PHAC is a collaborative group of community organizations led by the Greater Sullivan County Public Health Network. GSC Public Health Advisory Council's vision is to foster a community that supports healthy lives, health equity, and wellbeing for people of all ages. The PHAC meets approximately six times per year, and regularly reviews available health data sources for our region. Workgroups support, or are being created to support, efforts in each priority area. The PHAC identified priorities for the first time in 2015-2016¹⁰.

³

<http://vrh.org/wp-content/uploads/2018/09/FY2018-VRH-Community-Health-Needs-Assessment-final.pdf>

⁴

<https://www.newlondonhospital.org/wp-content/uploads/2019/01/FY2018-NLH-Community-Health-Needs-Assessment.pdf>

⁵<https://lakesunapeevna.org/images/pdfs/2017-CHNA-Final-Report-1.pdf>

⁶ <https://www.countyhealthrankings.org/>

⁷ <https://wisdom.dhhs.nh.gov/wisdom/>

⁸

<http://nhvieww.maps.arcgis.com/apps/PublicGallery/index.html?appid=38764e6f2a894165a60dd5c983543221>

⁹ <https://wonder.cdc.gov/>

¹⁰

<https://drive.google.com/file/d/1b5JMTf45Ba3R7IRUEKDUQ0cUmqAgToNs/view>

In 2019, the PHAC reviewed the updated community health needs assessments and revised the priorities appearing here.

Priorities

The priority areas for the Greater Sullivan County Public Health Region include substance misuse prevention and reduction, emergency preparedness, health & wellness, strengthening families, access to care, housing and transportation. The following section describes each priority area briefly, but they are not listed in any particular order. The PHAC identified housing and transportation as new priorities this year. Strengthening families is a change to our previous Healthy Families priority, and Health & Wellness is a change to our previous Healthy Eating Active Living priority. Access to care, emergency preparedness and substance misuse prevention and reduction remain priorities.

Social determinants of health contribute to each priority area and will be addressed throughout the work in all priority areas. We are also committed to exploring and taking action against racial disparities in our region within all of our priority areas. Some priority areas inevitably overlap, and collaborative work is sometimes placed in one area or the other for practical reasons and to avoid duplication.

Each priority area below contains an aspirational statement of wellbeing, known as a "result" to people who use Results Based Accountability¹¹. There is also a description of this priority area, community health needs assessment information that inform selection of this priority, and a summary of our current view of this priority during the COVID-19 pandemic response.

Each of these priority areas has public health network members engaging in this work in our region. Some areas have long-standing groups guiding the work and other areas have newly emerging groups of collaborators coming together to work more impactfully together. Connect with people doing this work through the GSCPHN.org website and reading the PHAC's annual report.

¹¹ <https://clearimpact.com/results-based-accountability/>

SUBSTANCE MISUSE PREVENTION AND REDUCTION

Reduce harms from substance misuse

Substance misuse may include alcohol and other drugs including tobacco. Sullivan county often has the lowest drug overdose death rate in the state of New Hampshire¹². Still, both Hospital Community Health Needs Assessments identify Alcohol and drug misuse prevention, treatment and recovery as a priority area in the top three community priorities. Current regional efforts include expanding effective prevention, treatment, harm reduction and long term recovery support for substance misuse and mental health.

Initial reports of substance use imply that use has increased during the pandemic¹³, but we do not yet fully understand the breadth of the pandemic's effects on substance misuse in our community. Our region adapted with expanded telehealth services for substance use disorder, zoom recovery support meetings and more. Substance misuse prevention services traditionally delivered in person were disrupted by physical distancing for the COVID-19 pandemic, but services were delivered online as possible.

EMERGENCY PREPAREDNESS

Everyone is prepared for and responsive to public health emergencies

Our experience responding to the COVID-19 pandemic has heightened the need to be prepared and connected for a public health emergency. The emergency preparedness team is made up of partners including municipalities, fire and Emergency Medical Services departments, police, hospitals, colleges, schools, nursing homes, and many others. These partners have planned, exercised and worked hard to be as prepared as possible to respond to COVID-19 and other public health emergencies as they are identified.

Two areas identified by the partners as opportunities for increased work include strengthening engagement of

¹²

<https://www.arcgis.com/apps/MapSeries/index.html?appid=fc64bc08d7724f0d8a47c128832a98a2>

¹³

<https://med.dartmouth-hitchcock.org/documents/survey-report-covid-19-substance-use-new-hampshire.pdf>

regional partners and assessing and strengthening regional capacity to provide information to the public. Furthermore, the partners will work to expand closed point of dispensing locations, and to continue to exercise emergency plans.

HEALTH & WELLNESS

Everyone engages in positive health behaviors and is able to achieve a high quality of life

The focus in this area includes healthy eating, active living, healthy aging, stress reduction, suicide prevention, and active transportation. Both hospital community health needs assessments identified senior services including assisted living or long term care services and supports for aging in place in top ten community priorities. During the COVID-19 pandemic, many in-person events were cancelled while virtual and hybrid programming has been promoted and encouraged.

STRENGTHENING FAMILIES

All families have the supports to be healthy and thrive in our community

This priority has a youth and parent focus and includes improving access to quality child care, reducing teen births and food insecurity, expanding sexual health education, reducing adverse childhood experiences, improving healthy family relationships, and reducing domestic violence and child abuse. Both hospital Community Health Needs Assessments identified family strengthening including poverty, domestic and family violence and childhood trauma including bullying as priorities in the top five. Extended school closures during the pandemic have increased the need for creative delivery of support services usually provided in schools and childcare settings. In addition, COVID-19 closures severely disrupted childcare access for working families.

ACCESS TO CARE

Everyone has access to quality, affordable healthcare.

This priority includes improving access to care and health insurance and expanding the local workforce for mental and dental health care.

Both hospital needs assessments identified the following needs: availability of primary care services, dental services, mental health services, and health care for seniors along with access to affordable health insurance, health care services and prescription drugs. During the

COVID-19 pandemic, our region experienced restrictions on elective medical care and extensive use of telemedicine, which illuminated some technology and internet access disparities in our region.

HOUSING

Everyone will have quality, affordable, permanent housing.

This area includes universal access to healthy homes without lead or other harmful environmental exposure, good air quality, affordable housing and workforce housing. Valley Regional Hospital Community Health Needs Assessment identified Social determinants of health including affordable housing, transportation and poverty. During the pandemic, restrictions on evictions temporarily reduced housing insecurity, but the economic impact of the pandemic is expected to increase housing insecurity in the future.

TRANSPORTATION

Everyone is able to get where they need to be, when they need to be there.

This area includes accessible transportation and transportation to work and health care. Valley Regional Hospital Community Health Needs Assessment identified Social determinants of health including affordable housing, transportation and poverty. This region has limited public bus routes, ride sharing and volunteer drivers to assist people who can not drive themselves to critical services within the region. During the pandemic, already limited public transportation and volunteer driving services in our region were further reduced.

About the Public Health Advisory Council

HISTORY

The Public Health Advisory Council (PHAC) was established in 2015 and is one of thirteen State of New Hampshire Public Health Advisory Councils, serving 16 towns in the Greater Sullivan County (GSC) Region. The PHAC guides the work of the Regional Public Health Networks that were created to ensure coordinated and comprehensive delivery of essential public health services, and facilitate an ongoing network of partners to address regional public health needs.

The GSC PHAC consists of community members representing multiple sectors and towns/cities throughout the Public Health Region and beyond.

VISION

To foster a community that supports healthy lives, health equity, and wellbeing for people of all ages.

GOAL

The goal is to understand the health and safety needs of Greater Sullivan County, engage the community in developing and implementing a comprehensive approach to improving population health outcomes, and advocate for new and existing resources to advance health.

Acknowledgements

Thank you to the many organizations and community members who attended meetings, participated in needs assessments, and contributed to this process. Many organizations participate in these efforts including Valley Regional Hospital, New London Hospital, the City of Claremont, Community Dental Care of Claremont, Dartmouth-Hitchcock Medical Center, Claremont Lead Action Task Force, Lake Sunapee Region VNA and Hospice, SAU 43, SAU 6, Summercrest Senior Living Community, Southwestern Community Services, Sullivan County, Upper Valley Lake Sunapee Regional Planning Commission, West Central Behavioral Health, TLC Family Resource Center, the Center for Recovery Resources, Newport Fire Department, River Valley Community College, Groups Recover Together, Better Life Partners, HIV/HCV Resource Center, Keady Family Practice, Region I Integrated Delivery Network, Service Link, Turning Points Network, New Futures, Newport Police Department, Dartmouth-Hitchcock Norris Cotton Cancer Center, Upper Valley Public Health Council, Larry Flint-Senior Advocate and others.

A special thank you to Peter Wright, former CEO of Valley Regional Hospital and first chair of the PHAC 2016-2019 and Catherine Bardier, Vice President for Population Health at New London Hospital and current chair of the PHAC. We are especially grateful to the other members of the PHAC Leadership Team, who do so much for public health in our region: Jacqui Baker, Beth Daniels, Amanda Mace, Hilary Schuler, Cynthia Twombly, and Kirsten Vigneault.

Aurora Drew, PhD is a consultant to the GSC Public Health Network. She is a faculty member at the Dartmouth Institute for Health Policy and Clinical Research at Geisel School of Medicine at Dartmouth. Email: aurora.l.drew@dartmouth.edu

Questions or want to learn more? Email us at GSCPHN@hitchcock.org, follow us on Facebook at GSCPHN or visit our website at www.GSCPHN.org

ADDENDUM

January 2024 from the Emergency Preparedness Coordinator.

Our experience responding to the COVID-19 pandemic has heightened the need to be prepared and connected for a public health emergency. The emergency preparedness team is made up of partners including municipalities, fire and Emergency Medical Services departments, police, hospitals, colleges, schools, nursing homes, and many others. These partners have planned, exercised and worked hard to be as prepared as possible to respond to any public health emergencies as they are identified.

Three areas identified by the partners as opportunities for increased work include strengthening engagement of regional partners, assessing and strengthening regional capacity to provide information to the public, and establishing regional American Red Cross shelters throughout Greater Sullivan County. Furthermore, the partners will work to expand closed point of dispensing locations, and to continue to update and exercise emergency plans.