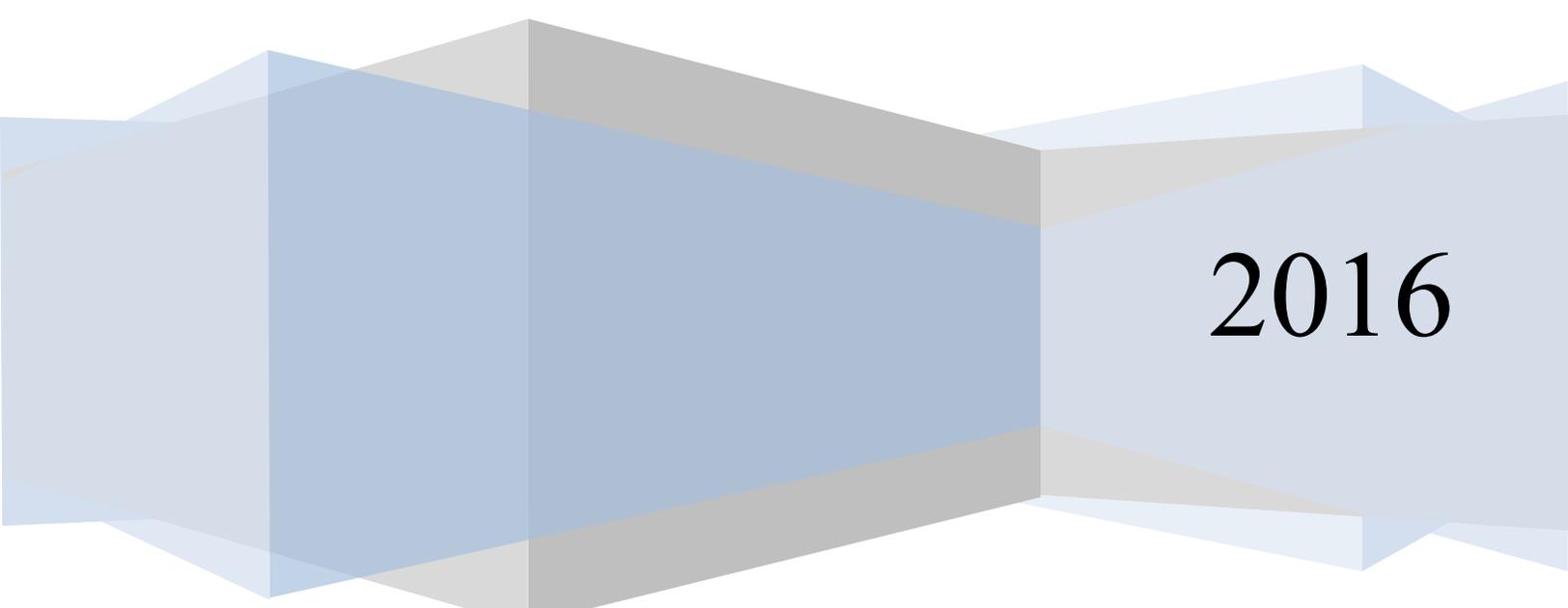


Littleton Regional Healthcare

Community Health Needs Assessment

Prepared by:
North Country Health Consortium
Littleton, NH



2016

Littleton Regional Healthcare Community Health Needs Assessment 2016

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North Country Healthcare System Partners:

- Androscoggin Valley Hospital
- Littleton Regional Healthcare
- North Country Health Consortium
- Upper Connecticut Valley Hospital
- Weeks Medical Center

Littleton Regional Healthcare
Littleton Area Community Health Needs Assessment
Executive Summary

Littleton Regional Healthcare (LRH) is a not-for-profit critical access hospital that offers a large variety of medical services to meet the growing healthcare needs of our community. Our mission is to provide quality, compassionate and accessible healthcare in a manner that brings value to all. We are collaborating with our neighboring hospitals and providers to ensure LRH will be positioned to serve our communities with high quality, cost-effective healthcare services for years to come.

Littleton Regional Healthcare is located in Grafton County, at the edge of the White Mountains and bounded on the northwest by the Connecticut River, and is considered the "business hub" of the Western White Mountains. LRH's primary service area includes Littleton, Bethlehem, Lisbon, Franconia, Sugar Hill. LRH's secondary service area includes Whitefield, Lancaster, Groveton, Monroe, North Woodstock, Lincoln, Woodsville, and Bath (all in NH), and St. Johnsbury, Lunenburg, Lyndonville, Concord, Gilman (all in VT). This area spans across a good majority of Northern New Hampshire and the Northeast Kingdom of VT.

The Affordable Care Act requires a not-for-profit hospital to conduct a community health needs assessment every three years to retain tax-exempt status. The 2016 Littleton Regional Healthcare Community Health Needs Assessment was conducted by the North Country Health Consortium (NCHC). The purpose of the community health needs assessment is to develop strategies to address the community's health needs and identified issues.

2016 Community Health Needs Assessment Summary of Findings

As part of the 2016 Littleton Regional Healthcare Community Health Needs Assessment, 49 community leaders and 203 community members were surveyed to gather information about health status, health concerns, unmet health needs and services, and suggestions for improving health in the community.

Key findings from the Community Survey:

The *top five serious health issues* in the Littleton area that were identified by the community assessment surveys were:

- **Substance Misuse** (includes drugs, opioids, heroin, etc.) (91.4%)
- **Mental Health Problems** (81.5%)
- **Obesity/Overweight** (81%)
- **Alcohol Abuse** (77.9%)
- **Smoking and Tobacco Use** (74.4%)

The *top five serious health concerns* for the Littleton area that contribute to the most serious health issues were identified to be:

- **Drug Abuse** (88%)
- **Cost of prescription drugs** (79%)
- **Lack of Physical Exercise** (77%)
- **Lack of Dental Insurance** (76%)
- **Cost of Healthy Food** (72%)

Key findings from the Key Informant Survey:

The *top seven serious health issues* in the Littleton area, as identified by key informants, were:

- **Mental Health Problems** (91%)
- **Substance Misuse** (includes drugs, opioids, heroin, etc.) (89%)
- **Alcohol Abuse** (82%)
- **Obesity/Overweight** (82%)
- **Physical Inactivity** (80%)
- **Smoking and Tobacco Use** (80%)
- **Oral Health/Dental Disease** (80%)

Littleton Regional Healthcare

Description of Littleton Regional Healthcare Service Area

The Littleton Regional Healthcare (LRH) service area is Grafton County, although services are primarily delivered in the northern tier of the county. Towns in the service area include the following zip codes:

03215 Waterville Valley	03217 Ashland	03222 Bristol
03223 Campton	03238 Glencliff	03240 Grafton
03241 Hebron	03245 Holderness	03251 Lincoln
03262 North Woodstock	03264 Plymouth	03266 Rumney
03274 Stinson Lake	03279 Warren	03282 Wentworth
03285 Thornton	03293 Woodstock	03561 Littleton
03574 Bethlehem	03580 Franconia	03585 Lisbon
03585 Lyman	03586 Sugar Hill	03740 Bath
03741 Canaan	03748 Enfield	03749 Enfield Center
03750 Etna	03755 Hanover	03756 Dartmouth Hitchcock
03765 & 6 Lebanon	03765 Haverhill	03768 Lyme
03769 Lyme Center	03771 Monroe	03774 North Haverhill
03777 Orford	03779 Piermont	03780 Pike
03784 West Lebanon	03785 Woodsville	

Grafton County covers nearly one-fifth of the state of New Hampshire. Grafton County includes 1,709 square miles of land and 40.8 square miles of inland water area. The population density is 52.2 persons per square mile. Sixty-nine percent of Grafton County is rural.

According to the US Census Bureau, the 2014 population was 89,360, only slightly higher than the population 89,114 in 2010.¹ The median age in Grafton County is 45.6 years, compared to 43.9 in New Hampshire. Median income in Grafton County in 2013 was \$51,926, while the statewide median income was \$64, 230.²

¹ <http://www.census.gov/quickfacts/table>

² <http://www.city-data.com/city/Grafton-New-Hampshire.html>

The following table displays the 2016 County Health Rankings Health Outcomes and Health Factors Data for Grafton County, New Hampshire³

	Grafton County	Error Margin	Top US Performers*	New Hampshire	Rank (of 10)
Health Outcomes					3
<i>Length of Life</i>					2
Premature death	5,000	4,400-5,500	5,200	5,400	
<i>Quality of Life</i>					7
Poor or fair health	12%	12-12%	12%	13%	
Poor physical health days	3.3	3.1-3.4	2.9	3.	
Poor mental health days	3.5	3.3-3.6	2.8	3.6	
Low birth weight	6%	6-7%	6%	7%	
Health Factors					2
<i>Health Behaviors</i>					6
Adult smoking	17%	17-18%	14%	18%	
Adult obesity	27%	24-29%	25%	27%	
Food Environment Index	8.3		8.3	8.4	
Physical Inactivity	18%	16-20%	20%	21%	
Access to exercise opportunities	83%		91%	84%	
Excessive drinking	18%	18-19%	12%	19%	
Alcohol-impaired driving deaths	38%	30-45%	14%	33%	
Sexually transmitted infections	264.6		134.1	236.2	
Teen births	13	12-14	19	16	
<i>Clinical Care</i>					2
Uninsured	16%	14-17%	11%	13%	
Primary care physicians	500:1		1,040:1	1,060:1	
Dentists	1,260:1		1,340:1	1,430:1	
Mental Health Providers	270:1		370:1	390:1	
Preventable hospital stays	38	35-41	38	46	
Diabetic monitoring	90%	84-95%	90%	90%	
Mammography screening	71%	66-76%	71%	70.0%	
<i>Social & Economic Factors</i>					2
High school graduation	92%		93%	88%	
Some college	66%	62-70%	72%	68%	
Unemployment	3.6%		3.5%	4.3%	

³ 2016 County Health Rankings <http://www.countyhealthrankings.org/app/new-hampshire/2016/county/snapshots/007>

	Grafton County	Error Margin	Top US Performers*	New Hampshire	Rank (of 10)
Children in poverty	16%	11-20%	13%	13%	
Income inequality	4.2	3.9-4.5	3.7	4.2	
Children in single-parent households	32%	28-36%	21%	28%	
Social associations	13.8		22.1	10.3	
Violent crime	169		59	181	
Injury deaths	57	50-64	51	59	
<i>Physical Environment</i>					1
Air pollution - particulate matter	10.5		9.5	10.5	
Drinking water violations	yes		no		
Severe housing problems	16%	14-17%	9%	16%	
Driving alone to work	73%	72-75%	71%	81%	
Long commute- driving alone	28%	26-30%	15%	38%	

*90th percentile, i.e., only 10% are better. Note: Blank values reflect unreliable or missing data

In terms of geography, northern Grafton and Coos counties are really one contiguous region forming the upper third of the state of New Hampshire. It is an area defined by the natural beauty of the White Mountains and burdened by the substantial economic and geographic barriers they create. For this assessment selected Coos County data is used because Northern Grafton County, the primary service area for Littleton Regional Healthcare, is more closely aligned demographically with Coos County than with the rest of Grafton County.

The table below displays and compares selected socioeconomic and demographic characteristics of the 18+ population in the North Country, the state of New Hampshire and the United States.

18+ Population Demographics and Socioeconomic Indicators – Geographic Comparison⁴

Variable	North Country	New Hampshire	United States
18+ population	82%	79%	77%
65+ population	20%	14%	15%
75+ population	9%	6%	6%
Median age	47 years	42 years	37 years
Did not finish high school	15%	9%	13%
High school graduate or higher	87%	92%	86%
Bachelor's degree or higher	18%	34%	29%
Currently employed	48%	61%	58%
Out of work 1 year or more	2%	3%	4%
Current unemployment rate	9%	7%	6%
Income less than \$15,000	15%	7%	12%

⁴ 2010- 2013 Behavioral Risk Factor Surveillance Survey, CDC BRFSS and NH Health WRQS web site, Institute for Health Policy and Practice, University of New Hampshire. Data for US, US Census web site, American Community Survey, 2013.

Variable	North Country	New Hampshire	United States
per year			
Income \$15,000-\$25,000	22%	13%	18%
Income \$25,000-\$35,000	18%	10%	12%
Income \$50,000+	30%	53%	44%
Median household income	\$41,985	\$64,916	\$53,046
Families at or below 100% of FPL in last 12 months	13%	9%	11%
Population 18-64 at or below 100% FPL	12%	8%	13%
Population 65+ at or below FPL	10%	6%	9%

The 18+ population accounts for 82 percent of the total population of the service area. As may be ascertained from this table, the North Country population 18+ is a larger percent of the total population than the population in the state as a whole or nationally and the 65+ population is substantially larger. The data in this table reflect an area population that is not only older but also has less income and less education than the populations of the state and nationally. Before the age of 65, the North Country population is evenly divided between males and females. However, by age 65, females account for over 11 percent of the population whereas males account for approximately eight percent. In the rest of the state, 65+ females comprise eight percent of the population while 65+ males comprise five percent of the population.

The North Country population is homogeneous with over 97 percent indicating their race as Caucasian. The state of New Hampshire reflects a population that is 94 percent Caucasian, one percent African American, two percent Asian, two percent Hispanic, and one percent other.⁵

Life expectancy in the US stands at almost 79 years – an increase of over 20 years since the 1950s. Longer life also means increases in the numbers of diseases affecting the population, especially the over 65 population. Many of these diseases are chronic diseases and include cardio-vascular disease, hypertension, diabetes, respiratory diseases and others. Although these diseases affect people of all age ranges, patients over 65 tend to have more than one chronic diseases or co-morbidities. More than 65 percent of Americans 65+ and 75 percent of those 80+ have multiple chronic diseases.

The table below reflects a North Country population that suffers from chronic diseases at rates that are, in most cases, higher than those for New Hampshire and the rest of the country. In addition, this population reflects higher rates of unhealthy behaviors such as smoking, overweight and obesity as well as leading less active lives than the populations in the state and in the country.

⁵ US Census web site, American Community Survey, 2013-2014.

Chronic Diseases – Geographical Comparison⁶

Risk Factor	North Country 18-64	North Country 65+	NH 18-64	NH 65+	United States 18-64	United States 65+
Diabetes	8%	24%	7%	22%	6%	20%
Hypertension	27%	63%	24%	61%	24%	61%
Angina or Coronary Artery Disease	4%	15%	2%	13%	2%	13%
Heart Attack	4%	12%	2%	12%	3%	13%
Stroke	1%	6%	1%	7%	2%	8%
Overweight (Obese)	34% (33%)	43% (28%)	34% (28%)	39% (39%)	34% (27%)	40% (26%)
Smoking	23%	9%	19%	7%	17%	9%
Physical Activity in last 30 days	75%	58%	82%	69%	76%	67%

The following table reflects an area with greater risk for premature death and one that suffers from chronic diseases at rates substantially higher than New Hampshire and, in many cases, the United States.

Regional, State and National Comparison of Health Status Indicators⁷

Indicator	North Country Region	NH State Rate/Percent	National Benchmark Rate/Percent
Premature Mortality (Under 65 Years)⁸	234.7	180.1	⁹
Percent Elderly (65 & older)	19.4%	12.0%	12.4%
Age Adjusted Diabetes Prevalence	11.1%	7.1%	6.5%
Percent Overweight	38.6%	36.5%	35.8%
Percent Adult Obese	31%	25.8%	25%
Asthma Prevalence	15.6%	11.4%	9.1%
Hypertension Prevalence	36.7%	30.6%	30.8%
Heart Attack Prevalence	7.4%	4.1%	4.4%
High Cholesterol Prevalence	43.6%	38.7%	38.3%
Low birth weight	6.3%	7.6%	
Currently smoking	22.8%	16.9%	17.3%
Heavy alcohol use risk factor	6.1%	6.4%	4.9%
Always wear seat belt	73.3%	81.1%	
General Health Status			
Fair	15.3%	9.9%	12.4%
Poor	4.9%	3.8%	3.8%

⁶ 2011-1013 Behavioral Risk Factor Surveillance Survey, CDC BRFSS web site and New Hampshire HealthWRQS web site. Institute for Health Policy and Practice, University of New Hampshire.

⁷ Data in this table were obtained from the 2011 Behavioral Risk Factor Surveillance Survey at the NH Health WRQS web site and the US Center For Disease Control web site.

⁸ Per 100,000 population

⁹ No data available

Methodology

With assistance from the North Country Health Consortium (NCHC), Littleton Regional Healthcare (LRH) conducted the 2016 Community Health Needs Assessment (CHNA).

The purpose of the CHNA is to survey community members and key leaders to get information related to the demographic, socioeconomic, health status, environmental, and behavioral characteristics of residents in the LRH service area. In addition to these surveys, secondary data collected from the U.S. Bureau of the Census, Behavioral Risk Factor Surveillance Survey, County Health Rankings, and the NH State Health Profile, is reviewed and used as benchmark data to see how the area compares to state and national trends. Information from the surveys and secondary data sources are used to evaluate the health of the community, identify high priority health needs, and develop and implement strategies to address the needs of the community.

NCHC and LRH staff have been meeting with community partners since spring 2016 to plan and implement both the Community Survey (see appendix A) and the Key Informant Survey (see appendix B). To prepare for conducting the 2016 health needs assessment, North Country Health Consortium and LRH accomplished the following:

- Developed a 2016 CHNA survey tool;
- Conducted the formal 2016 CHNA between July 2016 and September 2016;
- Compiled the results of the 252 CHNA;
- Analyzed the survey data and secondary data;
- Prepared the 2016 Community Health Needs Assessment Report

Process for conducting Community Survey

A Community Health Needs Assessment 2016 Outreach Plan was created for conducting the Community Survey. The Community Survey was designed to collect demographic and socioeconomic information on the respondent and information related to their perception of the health and wellness needs of the community. Survey Monkey was used to develop an electronic survey. Two hundred and three (203) Community Surveys were completed.

Marketing, Outreach, and dissemination of the Community Survey

LRH printed a supply of hard-copy community needs surveys and outreach flyers. Paper surveys and flyers were distributed to identified community locations. Organizations with hard copies were asked to disseminate and collect completed surveys for periodic collection by NCHC. Additionally, NCHC provided a “script” to be used by individuals at designated organizations to assist with survey collection. Paper surveys were collected and manually entered into Survey Monkey in order for all of the data to be aggregated together. Twenty-nine community sites assisted with survey dissemination.

Electronic survey files were made available online via the NCHC website.

Marketing via Social Media and other Websites

Social media was used to reach a larger audience. Community partners with an established social media presence, such as a Facebook page, assisted in the marketing and outreach effort by posting information about the survey as well as the link to the survey. Organizations also posted information on their websites about the CHNA process with the Community Survey link. Links and a QR code for smartphone users were established in order to scan the code for direct access to the survey. Sixteen on-line outlets were used for survey dissemination.

Newspapers

The local newspapers were used to promote Community Survey. Community residents were informed about the CHNA, provided the Survey Monkey link, and provided with locations (town offices, churches, libraries, etc.) where a paper survey could be completed.

Process for conducting Key Informant Survey

Survey Monkey was also used to gather information from 49 community leaders and key stakeholders in the LRH Service Area. This group represented a broad constituency including area business and economic development leaders, community board members of health and human service organizations, municipal government, and health and human service providers. All of these individuals responded to the survey directly on-line.

Littleton Regional Healthcare
Littleton Area Community Health Needs Assessment
Community Survey Findings

Demographics of Survey Respondents

❖ **Duration of residency in the Littleton Area**

57% of respondents have lived in the Littleton area for 16+ years. Additional responses indicate 12.1% having lived in the area 11-15 years; and 30.9% having resided in the area for 10 years or less.

I have lived in my community for:	% of Respondents
Less than 1 year	4.2%
1-5 years	16.4%
6-10 years	10.3%
11-15 years	12.1%
16+ years	57.0%

❖ **Educational Attainment**

25.5% of respondents have advanced degrees and 25.5% are four-year college graduates. About 33.9% have had some college education or are community college graduates. 14.5% percent graduated from high school, and 0.6% did not complete high school. 41% of college graduates (58 out of 142) indicated that they are/were first-generation college students.

❖ **Age**

12.1% of respondents were 65 or older; 52.7% of respondents were between 45 and 64 years old, and another 26.7% represent those in the 30-44 years age group. 7.9% were between 18 and 29 years of age. 85.5% of the respondents are female and 14.5% are male.

How old are you?	% of Respondents
Less than 18 years	0.6%
18-29 years	7.9%
30-44 years	26.7%
45-64 years	52.7%
65 years or older	12.1%

❖ **Household Data and Employment Status**

55.5% of households have 2-3 individual occupants, while 25% represent homes with 4-5 members. Additionally, single-occupancy households represent 15.9% of respondents.

55.5% of respondents reported having a household annual income over \$60,000; 14.8% are in the \$50,001 to \$60,000 range; 7.1% are in the \$40,000 to \$50,000 range; 9.7% are in the \$30,001 to \$40,000 range; and 12.8% had a household income of less than \$30,000.

Employment status of respondents included 68.8% of full-time employed individuals; 13% of part-time employed; 1.3% of unemployed and 1.3% of long-term unemployed (defined as more than 1 year of unemployment); and 11.7% of whom were retired. An additional 3.9% reported being retired, but working part-time. Additionally, 14 of 154 respondents indicated a status of disabled, stay at home parent, on maternity leave, a homemaker, self-employed, per diem, in a temporary position, and a full-time caregiver.

Annual Household Income	% of Respondents
Under \$12,000	1.9%
\$12,001-\$20,000	3.2%
\$20,001-\$30,000	7.7%
\$30,001-\$40,000	9.7%
\$40,001-\$50,000	7.1%
\$50,001-\$60,000	14.8%
Over \$60,000	55.5%

Health and Dental Care

❖ **Health and Dental Insurance**

For the following, "healthcare provider" refers to a doctor, nurse or other medical professional who provides routine check-ups, care for health problems, or management of health conditions.

Respondents were asked about their health and dental insurance status and about their health and dental care providers.

Respondents were asked about health and dental care:	2016
Report having health insurance	97.4%
Report having a healthcare provider	96.4%
Report seeing a healthcare provider at least once in the past year	92.2%
Report having dental insurance	69.2%
Report seeing a dentist at least once in the past year	79.9%

Respondents indicated the following regarding the source of their health insurance coverage:

Health Insurance Coverage	2016
Purchased directly from company or agency	8.2%
Enrolled in the Health Insurance Marketplace (“Obamacare”)	8.2%
Insured through employer	71.1%
Medicare/Medicaid	19.6%
NH Health Protection Program (“Expanded Medicaid”)	0.5%
Do not currently have health insurance.	2.6%

Respondents indicated the following regarding the source of their dental insurance coverage:

Dental Insurance Coverage	2016
Purchased directly from company or agency	4.1%
Insured through employer	64.4%
Do not currently have dental insurance.	30.8%

45.5% of the respondents have a primary healthcare provider that is located at North Country Primary Care (at Littleton Regional Healthcare) and 31.5% of the respondents see a provider at Ammonoosuc Community Health Services. 6.7% of respondents see a provider at Weeks Medical Center. Additionally, 12.9% see a provider outside of the North Country Healthcare System, and 4.5% indicated that they do not have a healthcare provider. 55.4% of respondents have been seeing their primary healthcare provider for 5+ years.

Location of Primary Healthcare Provider	% of Respondents
Indian Stream Health Center	0%
Coos County Family Health Services	0%
Weeks Medical Center- Physician Offices	6.7%
Ammonoosuc Community Health Services	31.5%
North Country Primary Care (at Littleton Regional Healthcare)	45.5%
Seek care outside of the North Country Healthcare System	12.9%
Do not have a healthcare provider	4.5%

❖ **Hospital and Specialty Services**

For the following, "specialty care" refers to any specific health service(s) that focus on certain parts of the body, diseases/conditions, or period of life. A "specialist" refers to a healthcare provider that provides such services.

Respondents were asked if they received hospital and/or specialty care outside of the North Country Healthcare system. 16.7% of respondents indicated that they receive hospital or specialty care outside of the North Country Healthcare System and 14% indicated that they did not receive care from a hospital/specialist in the past year. Of respondents who indicate that they receive their hospital and/or specialty care from the North Country Healthcare System report the following:

Where do you receive your hospital and/or specialty care:	% of Respondents
Upper Connecticut Valley Hospital	0%
Androscoggin Valley Hospital	0%
Weeks Medical Center - Hospital	4.8%
Littleton Regional Healthcare	71.5%
Outside of the North Country Healthcare System	16.7%
Other <i>Includes: Dartmouth Hitchcock Medical Center; North Eastern Vermont Regional Hospital; Cottage Hospital; Boston Children's Hospital; Boston Partners in Health; Norris Cotton Cancer Center; Catholic Medical; St. Johnsbury Health Center; University of Vermont; ClearChoiceMD</i>	N/A

Reasons for acquiring hospital services and/or specialty care outside of the North Country Healthcare System varied, including personal choice (20.2%), referred by a healthcare provider (15.6%), and services not offered in the community (13.3%). Please note: multiple responses were accepted from participants:

Why did you receive care from a hospital and/or specialty care outside of the North Country Healthcare System:	% of Respondents
Personal Choice	20.2%
Services not offered in community	13.3%
Cost	4.6%
Recommended by health insurance provider	2.9%
Referred by healthcare provider	15.6%
Did not look for or receive hospital/specialty care outside of the North Country Healthcare System	52%
Other <i>Includes: recent relocation to the area; part-time residency in another state; receiving treatment in another state where injured; local dentist does not accept their dental insurance; insurance coverage limited to University of Vermont; lacking a primary care provider at time of service; care initiated at DHMC while</i>	N/A

<i>local dermatologist on medical leave; seeking a heart specialist; provider recommendation for thyroidectomy outside North Country; concerns trust, quality of care, and competency with complicated diagnosis; and perceptions of better care being available from outside sources and urban areas.</i>	
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❖ **Personal Wellness**

Respondents were asked about their health status in the areas of diabetes, heart disease, tobacco, weight, exercise, and mental health.

Respondents were asked about their health status:	2016
Report being told they have diabetes	5.1%
Report being told they have heart disease	5.1%
Report being told they have asthma	13.1%
Report being told they have high blood pressure	24.6%
Have been advised in the last 5 years to lose weight	49.4%
Report exercise at least 3 times a week	59.9%
Smoke cigarettes on a daily basis	5.8%
Use smokeless tobacco on a daily basis	0.6%
Report in the last 30 days that they drank 5 or more drinks of alcohol in a row within a couple of hours.	8.8%
Report usually feeling happy and positive about their life	82%

The Patient Health Questionnaire-2 (PHQ-2) depression screening revealed that of the 164 respondents to this question, 7% had little interest or pleasure doing things, while 1% out of the 166 participants felt down, depressed, or hopeless nearly every day.

How often have you felt the following in the past 2 weeks:					
Answer Options	Not at all	Less than half the days	About half the days	More than half the days	Every day
Little interest or pleasure doing things	96	45	11	10	2
Feeling down, depresses, or hopeless	107	49	9	1	0

Survey respondents were asked if they had health concerns that they had not discussed with their healthcare provider. Of those who responded, 15.3% said “yes,” and 70.5% said “no.” Given the opportunity to expound on the reason(s) why the respondent had not discussed their health concerns with their provider, the following responses were provided: too embarrassed and/or uncomfortable; unestablished relationship with provider and/or lack trust; individual perception that the issue(s) are minor or not significant; not having routine physicals; lack of motivation to

make an appointment just to discuss issues; high deductible and out of pocket expenses; provider dissatisfaction; and short appointment time.

Additionally, respondents were asked to indicate sources they were comfortable accessing for health and wellness information. 87.5% responded “A healthcare provider”; 59.5% responded “My Spouse/Significant Other”; 61.3% responded “Friend(s)/Peer(s)”; and 60.7% responded “Online,” which includes: Google search, Facebook, health/medical websites, online chats/forums, etc.

In regard to opportunities for physical wellness, respondents were asked how likely they were to use the following community venues for exercise or physical activity:

Venue/Location	Likely or Very Likely
Town Recreation Center	17%
At Home	83%
Around the neighborhood (ex. Walk, run, bike, etc.)	82%
Gym or weight room at local business	28%
National Parks (ex. hiking, kayaking, etc.)	62%
Fitness and/or yoga classes	35%
Other: <i>Includes: fitness classes that are local and affordable, instructor-led, high-intensity, and/or hosted at Littleton Regional Hospital due to “convenience”; classes at Littleton Regional Healthcare, especially the “Bone Builders” program; a gym at their place of employment; hospital gym; ballet studio; indoor track; local roads and trails for running and hiking; lakes and rivers to swim, kayak, and paddle board; and state parks for skiing; pedometer.</i>	N/A

❖ **Access to Health and Dental Care Services and Barriers to Overall Wellness**

Respondents were asked if health services were available when they or a family member needed them in the last two years. Of those who indicated that they needed and sought services, the following table reflects the accessibility of such services:

Services:	Did not Need/Did not Seek Services	Received Every Time	Received Some of the Time	Never Able to Get Services
Well care in a doctor’s office	16%	77%	3%	1%
Sick care in a doctor’s office	26%	66%	6%	1%
Dental cleaning	15%	76%	4%	5%
Dental filling(s)	42%	45%	6%	5%
Prescription drugs	14%	75%	9%	1%

Home health care services	89%	6%	2%	2%
Mental health counseling	80%	13%	6%	1%
Alcohol and drug abuse counseling	99%	0%	0%	1%
Emergency room care	53%	42%	5%	1%
Nursing home care	99%	1%	0%	0%
Assisted Living	100%	0%	0%	0%
Hospice Care	97%	3%	0%	0%
Lab work	13%	80%	6%	1%
X-ray	38%	58%	3%	1%
Eating disorder treatment	98%	0%	2%	0%
Cancer treatment	92%	8%	0%	1%
Rehab services (Physical Therapy or Occupational Therapy)	71%	23%	5%	1%
Nutrition services (ex. Counseling or Education)	89%	7%	1%	2%

Respondents were asked if they or their family were unable to receive health services in the last two years, why they were unable to get services. Of the 33 individuals who responded that they/their family needed services and were unable to receive them, the top five reasons included:

- Could not afford deductibles and co-pays (48%)
- Services unavailable in community (39%)
- Could not take time off work (30%)
- Do not have dental insurance (27%)
- Could not get an appointment in acceptable time frame (24%)
- Felt the issue could be self-managed/without medical intervention (24%)

❖ **Support System and Wellness**

Asked to identify all the people/groups they considered “support systems” or someone with whom they “can trust to talk,” 97.6% of survey respondents indicated having such a support outlet. A vast majority of respondents reported they could confide in family and friends, 91.8% and 81.8% respectively. Another 19.4% reported they chose the faith-based community to confide in. Only 4.1% of the respondents reported participating in an organized support group. Other respondents indicated counselors at local health and human service provider organizations. 2.4% of respondents felt they had no support system.

Community Wellness

Presented with a list of health issues and conditions, respondents were asked to identify the seriousness of health issues in their community. The top 5 serious health issues identified in the 2016 community survey were:

- **Substance Misuse** (includes drugs, opioids, heroin, etc.) (91.4%)
- **Mental Health Problems** (81.5%)
- **Obesity/Overweight** (81%)
- **Alcohol Abuse** (77.9%)
- **Smoking and Tobacco Use** (74.4%)

Respondents were posed with a list of situations and conditions to consider the impact that each has on the community's most serious health issues. Collectively, participants identified the following as the top 5 serious health concerns that lead to the most serious health issues in the community:

- **Drug Abuse** (88%)
- **Cost of prescription drugs** (79%)
- **Lack of Physical Exercise** (77%)
- **Lack of Dental Insurance** (76%)
- **Cost of Healthy Food** (72%)

Respondents were asked to consider the community's available recreational and social activities available for all age groups. The following table shows the combined rates of respondents that "agree" and "strongly agree" that there are "enough and adequate" resources to "help maintain the health and well-being" for the indicated groups:

Age group	Agree or Strongly Agree
Children	37%
Teenagers	19%
Adults	30%
Seniors	28%

Littleton Regional Healthcare
Littleton Area Community Health Needs Assessment
Key Informant Survey Findings

Key informant surveys were completed by 49 participants in the Littleton area; 10 participants indicated serving all or multiple North Country regions, including the Littleton area. The key informants who were recruited to complete the Key Informant Survey during summer 2016 were from the following occupational fields: healthcare, business, public safety, government, non-profit, social services, senior care, and other fields.

Throughout this report, “the community” refers to where the key informant works, practices, or serves community members.

❖ **Key Informant Demographics**

Key informants were asked to identify the occupational field that they represent. The respondents included:

Occupational Field	% of Respondents
Healthcare	60%
Education	0%
Business	6.7%
Public Safety	2.2%
Government	8.9%
Other: <i>Includes: public health, non-profit, law, pharmacy, social services, transportation for public and human services, pharmacy, senior care</i>	22.2%

The majority (57.8%) of key informant respondents indicated having worked, practiced, or served in the Littleton area for more than 10 years. 11.1% indicated having worked in the region for 7-10 years; 8.9% indicated 4-6 years; 6.7% indicated 1-3 years; and 15.6% have only been working in the region for less than 1 year.

Key informants who work in the Littleton area who also reside in the North Country indicated that they live in:

Area where Key Informants live:	% of Respondents
Colebrook area	2.2%
Lancaster area	13.3%
Littleton area	71.1%
Berlin area	6.7%
Other: <i>Includes: North Haverhill, Silver Lake, Lincoln</i>	6.7%

❖ **Community Health Priorities**

When key informants were asked to identify the serious health issues or concerns in the community, the following priority areas were identified:

Health Issue or Concern	% of Respondents who “Agree” or “Strongly Agree”
Mental Health Problems	91%
Substance Misuse <i>(includes drugs, opioids, heroin, etc.)</i>	89%
Alcohol Abuse	82%
Obesity/Overweight	82%
Physical Inactivity	80%
Smoking and Tobacco Use	80%
Oral Health/Dental Disease	80%
Diabetes	73%

The key informants were asked *identify the top five barriers that keep people from addressing their health needs*. Below are the top five responses listed in descending order of importance:

- **Lack of mental healthcare** (80%)
- **Cannot afford the deductibles and co-pays** (73%)
- **Lack of dental insurance** (70%)
- **Unwillingness to seek healthcare** (64%)
- **Lack of affordable prescription drugs** (62%)

The key informants were asked to *identify which high risk behaviors need to be addressed in the community*. The top responses in descending order are:

- **Substance Abuse (includes opioids, heroin, etc.)** (87%)
- **Tobacco Use** (87%)
- **Alcohol Abuse** (78%)
- **Domestic Abuse** (73%)

Below you will find the *top three healthy behaviors that key informants feel should be encouraged*:

- **Achieving and maintaining healthy weight status** (100%)
- **Eating healthy foods, like lean proteins, healthy fats, fruits and vegetables** (100%)
- **Maintaining oral health** (100%)

Key informants were asked about the conditions in the community that affect residents’ ability to live comfortably. The following were the top three responses:

- **Adequate transportation** (69%)
- **Adequate healthcare** (51%)
- **Length of commute to work** (44%)

Key informants were asked if the community had enough or adequate recreational and social activities available to help maintain the health and well-being of all age groups. The following responses were obtained:

Age group	Agree or Strongly Agree
Children	56%
Teenagers	27%
Adults	33%
Seniors	31%

Key informants were asked *if the community will be able to meet the physical and mental health needs of the aging population so they may lead full and productive lives at home.* Of those responding to this question, 18% said they “Agree” or “Strongly Agree,” while 40% said “Disagree.”

❖ **Personal Health**

Key informants were asked where their primary healthcare provider is located. They indicated the following:

Location of Primary Healthcare Provider	% of Respondents
Indian Stream Health Center	0%
Coos County Family Health Services	7.5%
Weeks Medical Center- Physician Offices	10%
Ammonoosuc Community Health Services	50%
North Country Primary Care (at Littleton Regional Healthcare)	22.5%
Seek care outside of the North Country Healthcare System	7.5%
Do not have a healthcare provider	2.5%
Other: <i>Includes: LinWood Medical Center, Kingdom Internal Medicine, Cheshire Medical Center, Dartmouth-Hitchcock Medical Center, and providers in: Concord, Salem, Keene, and Vermont</i>	N/A

Key informants were asked if they received care from a healthcare provider, hospital or specialist outside of the North Country Healthcare system. 39.5% of respondents indicated “yes”, 60.5% indicated “no.” Reasons for acquiring primary, hospital, or specialty care outside of the North Country Healthcare System varied, including personal choice (24.2%) and referred by healthcare provider (15.2%) (multiple responses were accepted from participants).

Why did you receive care from a hospital and/or specialty care outside of the North Country Healthcare System:	% of Respondents
Personal Choice	24.2%
Services not offered in community	9.1%
Cost	0%
Recommended by health insurance provider	0%
Referred by healthcare provider	15.2%
Did not look for or receive hospital/specialty care outside of the North Country Healthcare System	63.6%
Other <i>Includes: Recent relocation to area, currently live outside of New Hampshire, sought board-certified allergist/endocrinologist, oncology was not offered at LRH, confidentiality concerns, perceptions of provider competency</i>	N/A

**Littleton Regional Healthcare
Littleton Area Community Health Needs Assessment
Appendices**

Appendix A

North Country Health Needs: Community Survey 2016

Introduction

We are committed to the health of our communities!



North Country healthcare and human services organizations are interested in your opinion on the priority health concerns and needs in your community. Please take a few minutes to help make the North Country healthcare system the best it can be for you and your community. Participation in this survey is completely voluntary and your answers will remain confidential, as no one will be identified in the survey report.

Thank you,
Androscoggin Valley Hospital
Littleton Regional Healthcare
Upper Connecticut Valley Hospital
Weeks Medical Center

1. I live in:

- Colebrook area** (includes: **NH**: Clarksville, Colebrook, Columbia, Dixville Notch, Errol, Pittsburg, Stewartstown, and Stratford; **VT**: Averill, Beecher Falls, Brunswick, Canaan, Lemington, and Norton)
- Littleton area** (includes: **NH**: Bath, Bethlehem, Easton, Franconia, Sugar Hill, Lincoln, Lisbon, Littleton, Monroe, and North Woodstock; **VT**: Lyndonville, St. Johnsbury, and Waterford)
- Lancaster area** (includes: **NH**: Dalton, Groveton, Jefferson, Lancaster, Stark, Twin Mountain, and Whitefield; **VT**: Bloomfield, Concord, Gilman, Lunenburg, and Maidstone)
- Berlin area** (Includes: Berlin, Dummer, Errol, Gorham, Milan, Randolph, and Shelburne)
- Other (please specify)

Health and Dental Care

2. I have the following health insurance coverage (choose all that apply):

- Insurance I buy directly from a company or agency
- Insurance I get through the health insurance marketplace (aka. "Obamacare")
- Insurance through an employer
- Medicare
- Medicaid
- NH Health Protection Program (aka. expanded Medicaid)
- I don't have health insurance coverage

3. I have the following dental insurance coverage (choose all that apply):

- Dental insurance I buy directly from a company or agency
- Dental insurance through an employer
- I don't have dental insurance coverage
- Other (please specify):

4. In the past year, I have seen a dentist at least once for a regular check-up:

- Yes
- No
- Not sure

NOTE: For the following questions, "healthcare provider" refers to a doctor, nurse or other medical professional you see for routine check-ups, health problems, or management of health conditions:

5. I have a healthcare provider that I see at least once a year:

- Yes
- No
- Not sure

Other (please specify)

6. I have been seeing my healthcare provider for:

- Less than a year
- 1-2 Years
- 3-4 Years
- 5+ Years
- I don't have a healthcare provider

7. My primary healthcare provider is located at:

- Indian Stream Health Center
- Coos County Family Health Services
- Weeks Medical Center- Physician Offices
- Ammonoosuc Community Health Services
- North Country Primary Care (at Littleton Regional Healthcare)
- My primary healthcare provider is located outside the North Country healthcare system
- I don't have a primary healthcare provider.

Other Location outside the North Country healthcare system (please specify):

NOTE: For the following questions, "specialty care" refers to any specific health service(s) that focus on certain parts of the body, diseases/conditions, or period of life. A "specialist" refers to a healthcare provider that provides such services:

8. I receive my hospital and/or specialty care at:

- Upper Connecticut Valley Hospital
- Androscoggin Valley Hospital
- Weeks Medical Center- Hospital
- Littleton Regional Healthcare
- I get my hospital and/or specialty care outside of the North Country healthcare system
- I don't get hospital and/or specialty care

Other Location outside the North Country healthcare system (please specify):

9. In the past year, if you had looked for or received care from a healthcare provider, specialist, or hospital outside the North Country, please tell us why (check all that apply):

- Personal choice
- Services not offered in my community
- Cost
- Recommended by health insurance provider
- Referred by a healthcare provider
- I did not look for nor receive care from a healthcare provider, specialist, or hospital outside of the North Country healthcare system

Other (please specify):

North Country Health Needs: Community Survey 2016

Barriers to Overall Wellness

10. In the past two years, if you and/or your family needed OR were told you needed, any of the following health services, please tell us how often you and/or your family received these services:

	Did not need	Did not seek services	Received every time	Received some of the time	Never able to get services	Not sure
Well care in a doctor's office	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sick care in a doctor's office	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental cleaning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental filling(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prescription drugs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home health care services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental health counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Alcohol or drug abuse counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency room care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nursing home care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assisted living	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospice care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lab work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
X-Ray	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eating disorder treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cancer treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rehab services (physical or occupational therapy)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nutrition services (ex. counseling or education)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Barriers to Overall Wellness

11. In the past two years, if you and/or your family did not OR were unable to receive health services of any kind, please tell us why (check all that apply):

- My family and I did not need any health services
- My family and I received all the health services that we needed
- I/they preferred to manage the condition without medical attention
- I/they do not have a primary healthcare provider
- I/they could not get mental health services
- I/they do not have health insurance
- I/they do not have dental insurance
- I/they could not afford deductibles and co-pays
- I/they could not afford the medication prescribed
- The healthcare provider did not accept Medicaid
- The healthcare provider did not accept Medicare
- I/they could not get an appointment
- I/they could not get an appointment in an acceptable timeframe
- I/they could not take the time off from work
- I/they did not have transportation
- I/they felt that the issue or condition could be self-managed without medical intervention
- The service(s) I/they needed was not available in the community
- I/they felt there was a language barrier and could not get translation services
- I/they felt there were concerns about discrimination
- I/they felt there were concerns about confidentiality
- I/they felt that the healthcare provider did not effectively communicate in a way that I/they could understand my/their health condition(s)

Other (please specify):

Personal Health

12. I have been told by a healthcare provider that I have (check all that apply):

- Diabetes
- Heart disease
- Asthma
- High blood pressure
- None of the above
- I haven't seen or don't have a healthcare provider

13. In the last five years, my healthcare provider has advised me to lose weight:

- Yes
- No
- I haven't seen or don't have a healthcare provider

14. I have personal health concerns that I have NOT discussed with my healthcare provider:

- Yes, I have health concerns that I haven't discussed with my provider
- No, I have discussed all health concerns with my provider
- I don't have any health concerns
- I haven't seen or don't have a healthcare provider

If you have any health concerns that you have not discussed with your healthcare provider, please tell us why:

Personal Health

15. On average, the number of times per week that I currently exercise is:

- 0
- 1
- 2
- 3
- 4 or more

16. Please tell us, how likely are you to use the following venues in your community for exercise or physical activity:

	Very likely	Likely	Would consider	Not likely	Not sure
Town Recreation Center	<input type="radio"/>				
My home	<input type="radio"/>				
Around the neighborhood (ex. walk, run, bike, etc.)	<input type="radio"/>				
Gym or weight room at a local business	<input type="radio"/>				
National Parks (ex. hiking, kayaking, etc.)	<input type="radio"/>				
Fitness and/or yoga classes	<input type="radio"/>				

If any, please tell us other venues you are likely to use or the reason(s) for your answers:

17. I smoke cigarettes on a daily basis:

- Yes
- No

18. I use smokeless tobacco on a daily basis:

Yes

No

19. During the past 30 days, I have consumed 5 or more alcoholic drinks in a row, that is, within a couple of hours:

Yes

No

20. Please tell us, how often have you felt the following in the past 2 weeks?

	Not at all	Less than half the days	About half the days	More than half the days	Every day
Happy and positive about my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Little interest or pleasure doing things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Down, depressed, or hopeless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. I have a support system or someone I can trust to talk to, including (check all that apply):

Family

Friends

Faith-based community

Organized support group

No, I don't have a support system

Other (please specify):

22. I feel comfortable going to the following sources for information or advice related to health and wellness (check all that apply):

- A healthcare provider
- My spouse/ significant other
- My daughter/ son
- Extended family member(s)
- Friend(s) / peer(s)
- Online (including: Google search, Facebook, health/ medical websites, online chats/ forums etc.)
- Organized support groups/ clubs with people "like me" who are dealing with similar issues
- Magazines/ newspaper articles on health topics
- Books on health topics
- TV programs or talk shows on health topics

Other (please specify):

Community Wellness

For questions #23-27, please tell us how much you agree with the following statements in regards to the conditions and people indicated.

23. I believe the following health issues or conditions are serious problems in my community:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Lack of safe and healthy housing	<input type="radio"/>				
HIV/AIDS	<input type="radio"/>				
Diabetes	<input type="radio"/>				
Cancer	<input type="radio"/>				
Domestic violence	<input type="radio"/>				
Teenage pregnancy	<input type="radio"/>				
High blood pressure	<input type="radio"/>				
Suicide	<input type="radio"/>				
Mental health problems	<input type="radio"/>				
Heart disease and stroke	<input type="radio"/>				
Oral health/dental disease	<input type="radio"/>				
Alcohol abuse	<input type="radio"/>				
Substance misuse (includes drugs, opioids, heroin, etc.)	<input type="radio"/>				
Sexually transmitted diseases	<input type="radio"/>				
Child abuse and neglect	<input type="radio"/>				
Flu/contagious diseases	<input type="radio"/>				
Obesity/overweight	<input type="radio"/>				
Asthma	<input type="radio"/>				

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Smoking and tobacco use	<input type="radio"/>				
Physical inactivity	<input type="radio"/>				
Unemployment/ lack of jobs	<input type="radio"/>				
Low-income/ poverty	<input type="radio"/>				
Bedbugs in homes	<input type="radio"/>				
Lack of access to healthy foods	<input type="radio"/>				
People being prepared in the event of an emergency (ex. during natural disasters such as an ice storm)	<input type="radio"/>				

Other (please specify):

North Country Health Needs: Community Survey 2016

Community Wellness

24. I believe the following situations have a significant impact on the most serious health issues (including mental health and overall physical health) that I see in my community:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Health care services not available	<input type="radio"/>				
Health care services not affordable	<input type="radio"/>				
Unwillingness to seek healthcare	<input type="radio"/>				
Lack of health insurance	<input type="radio"/>				
Lack of dental insurance	<input type="radio"/>				
Lack of safe and healthy housing	<input type="radio"/>				
Cost of prescription drugs	<input type="radio"/>				
Bullying	<input type="radio"/>				
Discrimination	<input type="radio"/>				
Alcohol abuse	<input type="radio"/>				
Drug abuse	<input type="radio"/>				
Unemployment	<input type="radio"/>				
Lack of jobs	<input type="radio"/>				
Lack of transportation	<input type="radio"/>				
Poor nutrition	<input type="radio"/>				
Caregiver burnout	<input type="radio"/>				
Cost of healthy foods	<input type="radio"/>				
Lack of health information/education	<input type="radio"/>				
Lack of physical exercise	<input type="radio"/>				
Poverty	<input type="radio"/>				

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Lack of social opportunities	<input type="radio"/>				
Lack of community gatherings and other connections to the larger community	<input type="radio"/>				
Lack of volunteer opportunities	<input type="radio"/>				

Other (please specify):

25. I feel my community has enough and adequate recreational and social activities available to help maintain the health and well-being of the following age groups:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Children	<input type="radio"/>				
Teenagers	<input type="radio"/>				
Adults	<input type="radio"/>				
Seniors	<input type="radio"/>				

Please tell us reason(s) for your answers:

26. I believe the community will be able to meet the health needs (physical and mental) of the AGING population, so they may lead full and productive lives at home:

Strongly agree	Agree	Somewhat agree	Disagree	Not sure
<input type="radio"/>				

Please tell us reason(s) for your answer:

27. The following conditions affect my ability to live comfortably in my community:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Lead paint in my home	<input type="radio"/>				
Air quality	<input type="radio"/>				
Drinking water quality	<input type="radio"/>				
Not enough safe places to walk	<input type="radio"/>				
Adequate lighting at night	<input type="radio"/>				
Personal Safety in my home or community	<input type="radio"/>				
Adequate healthcare	<input type="radio"/>				
Adequate transportation	<input type="radio"/>				
The length of my commute to work	<input type="radio"/>				

Other (please specify):

Demographics

28. I have lived in my community for:

- Less than 1 year
- 1-5 years
- 6-10 years
- 11-15 Years
- 16 or more years

29. The number of people that live in my household is:

- 1
- 2-3
- 4-5
- 6-7
- 8-9
- 10 or more

30. My annual household income is:

- Under \$12,000
- \$12,001 - 20,000
- \$20,001 - \$30,000
- \$30,001 - \$40,000
- \$40,001 - \$50,000
- \$50,001 - \$60,000
- Over \$60,000

31. My current employment status is:

- Full-time employed (40+ hours per week)
- Part-time employed (less than 40 hours per week)
- Unemployed
- Long-term unemployed (more than 1 year unemployed)
- Retired
- Retired, but work part-time

Other (please specify):

32. The highest level of education I have completed is:

- | | |
|---|--|
| <input type="radio"/> Less than high school | <input type="radio"/> Community College graduate |
| <input type="radio"/> High school graduate | <input type="radio"/> Four-year college graduate |
| <input type="radio"/> Some college | <input type="radio"/> Advanced degree |

33. I was/am a first-generation college student:

- Yes
- No
- I did not attend college

34. My age group is:

- | | |
|--|---|
| <input type="radio"/> Less than 18 years | <input type="radio"/> 45-64 years |
| <input type="radio"/> 18-29 years | <input type="radio"/> 65 years or older |
| <input type="radio"/> 30-44 years | |

35. I am:

- Male
- Female

Community Member Insight

36. What is one change that would improve the health of your community?

37. What new or existing programs or services could be created or changed to help improve the health of the community?

38. Please tell us, why do you choose to live in your community?

Thank you for your time.

Appendix B

North Country Health Needs: Key Informant Survey 2016

1. Introduction

We are committed to the health of our communities!



North Country healthcare and human service organizations are interested in your opinion on the priority needs and health concerns in the community that you serve. Please take a few minutes to help make the North Country healthcare system the best it can be for the community. Participation in this survey is completely voluntary and your answers will remain confidential, as no one will be identified in the survey report.

Thank you,
Androscoggin Valley Hospital
Littleton Regional Healthcare
Upper Connecticut Valley Hospital
Weeks Medical Center

1. The community in which I work, practice, or serve community members is:

- Colebrook area** (includes: **NH**: Clarksville, Colebrook, Columbia, Dixville Notch, Errol, Pittsburg, Stewartstown, and Stratford; **VT**: Averill, Beecher Falls, Brunswick, Canaan, Lemington, and Norton)
- Littleton area** (includes: **NH**: Bath, Bethlehem, Easton, Franconia, Sugar Hill, Lincoln, Lisbon, Littleton, Monroe, and North Woodstock; **VT**: Lyndonville, St. Johnsbury, and Waterford)
- Lancaster area** (includes: **NH**: Dalton, Groveton, Jefferson, Lancaster, Stark, Twin Mountain, and Whitefield; **VT**: Bloomfield, Concord, Gilman, Lunenburg, and Maidstone)
- Berlin area** (includes: Berlin, Dummer, Errol, Gorham, Milan, Randolph, and Shelburne)
- Other (please specify):

North Country Health Needs: Key Informant Survey 2016

2. Community Health Priorities

NOTE: Throughout the survey, "the community" refers to where you work, practice, or serve community members.

For questions #2-8, please tell us how much you agree with the following statements in regards to the conditions and people indicated.

2. I believe the following health issues or conditions are a serious problem in the community:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Lack of safe and healthy housing	<input type="radio"/>				
HIV/AIDS	<input type="radio"/>				
Diabetes	<input type="radio"/>				
Cancer	<input type="radio"/>				
Domestic violence	<input type="radio"/>				
Teenage pregnancy	<input type="radio"/>				
High blood pressure	<input type="radio"/>				
Suicide	<input type="radio"/>				
Mental health problems	<input type="radio"/>				
Heart disease and stroke	<input type="radio"/>				
Oral health/ dental disease	<input type="radio"/>				
Alcohol abuse	<input type="radio"/>				
Substance misuse (drugs, opioids, heroin etc.)	<input type="radio"/>				
Sexually transmitted diseases	<input type="radio"/>				

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Child abuse and neglect	<input type="radio"/>				
Flu/ contagious diseases	<input type="radio"/>				
Obesity/overweight	<input type="radio"/>				
Asthma	<input type="radio"/>				
Smoking and tobacco use	<input type="radio"/>				
Physical inactivity	<input type="radio"/>				
Unemployment/ lack of jobs	<input type="radio"/>				
Low-income/ poverty	<input type="radio"/>				
Bedbugs in homes	<input type="radio"/>				
Lack of access to healthy foods	<input type="radio"/>				
People being prepared in the event of an emergency (ex. during natural disasters such as an ice storm)	<input type="radio"/>				

3. Community Health Priorities

3. The following barriers prevent community members from addressing their health needs:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Lack of access to healthy foods	<input type="radio"/>				
Lack of mental healthcare	<input type="radio"/>				
Lack of affordable prescription drugs	<input type="radio"/>				
Unwillingness to seek healthcare	<input type="radio"/>				
Cannot afford the deductibles and co-pays	<input type="radio"/>				
Health provider does not accept Medicaid	<input type="radio"/>				
Health provider does not accept Medicare	<input type="radio"/>				
Cannot get appointment in an acceptable timeframe	<input type="radio"/>				
Cannot take time off from work	<input type="radio"/>				
Health services needed are not available	<input type="radio"/>				
Language or translation services not available	<input type="radio"/>				
Lack of transportation to services	<input type="radio"/>				
Confidentiality concerns	<input type="radio"/>				
Discrimination concerns	<input type="radio"/>				

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Lack of regular doctor or health provider	<input type="radio"/>				
Lack of healthcare insurance	<input type="radio"/>				
Lack of dental insurance	<input type="radio"/>				

Other (please specify):

4. The following high-risk behaviors need to be addressed in the community:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Not getting cancer and heart disease screenings	<input type="radio"/>				
Alcohol abuse	<input type="radio"/>				
Substance abuse (opioids, heroin, etc.)	<input type="radio"/>				
Tobacco use	<input type="radio"/>				
Not wearing a seat belt	<input type="radio"/>				
Not wearing a helmet when riding a motorcycle or a bicycle	<input type="radio"/>				
Violent crimes	<input type="radio"/>				
Domestic abuse	<input type="radio"/>				

Other (please specify):

5. The following healthy behaviors should be encouraged in the community:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Achieving and maintaining healthy weight status	<input type="radio"/>				
Increasing physical activity	<input type="radio"/>				
Eating healthy foods, like lean proteins, healthy fats, fruits, and vegetables	<input type="radio"/>				
Preventing injury	<input type="radio"/>				
Keeping immunizations current	<input type="radio"/>				
Receiving regular health check-ups	<input type="radio"/>				
Maintaining oral health	<input type="radio"/>				
Smoking Cessation	<input type="radio"/>				
Safe Sex	<input type="radio"/>				

Other (please specify):

4. Environmental Barriers

6. In my opinion, the following conditions affect people's ability to live comfortably in the community:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Lead paint in buildings/ residences	<input type="radio"/>				
Air quality	<input type="radio"/>				
Drinking water quality	<input type="radio"/>				
Not enough safe places to walk	<input type="radio"/>				
Adequate lighting at night	<input type="radio"/>				
Personal safety in homes or the community	<input type="radio"/>				
Adequate healthcare	<input type="radio"/>				
Adequate transportation	<input type="radio"/>				
Length of commute to work	<input type="radio"/>				

Other (specify):

7. I feel the community has enough and adequate recreational and social activities available to help maintain the health and well-being of the following age groups:

	Strongly agree	Agree	Somewhat agree	Disagree	Not sure
Children	<input type="radio"/>				
Teenagers	<input type="radio"/>				
Adults	<input type="radio"/>				
Seniors	<input type="radio"/>				

Please indicate reason(s) for your answers:

8. I believe the community will be able to meet the health needs (physical and mental) of the AGING population so they may lead full and productive lives at home:

Strongly agree	Agree	Somewhat agree	Disagree	Not sure
<input type="radio"/>				

Please indicate reason(s) for your answer (including input or suggestions on existing or unavailable services):

5. Personal Health

NOTE: For the following questions, "healthcare provider" refers to a doctor, nurse, or other medical professional you see for routine check-ups, health problems, or management of health conditions; a "specialist" refers to a healthcare provider that focuses on certain parts of the body, diseases/conditions, or period of life:

9. My primary healthcare provider is located at:

- Indian Stream Health Center
- Coos County Family Health Services
- Weeks Medical Center - Physician Offices
- Ammonoosuc Community Health Services
- North Country Primary Care (at Littleton Regional Healthcare)
- My primary healthcare provider is located outside the North Country healthcare system
- I don't have a primary healthcare provider

Other location outside the North Country healthcare system (please specify):

10. In the past year, I have pursued care from a healthcare provider, specialist, or hospital outside of the North Country healthcare system:

- Yes
- No

11. In the past year, if you had pursued care from a healthcare provider, specialist, or hospital outside of the North Country healthcare system, please indicate why (select all that apply):

- Personal choice
- Services not offered in this community
- Cost
- Recommended by health insurance provider
- Referred by a healthcare provider
- I did not seek medical care outside of the North Country healthcare system

Other (please specify):

6. Demographics

12. The occupational field that I represent is:

- Healthcare
- Education
- Business
- Public Safety
- Government
- Other (please specify):

13. I have worked, practiced, or served in the community for:

- Less than a year
- 1-3 years
- 4-6 years
- 7-10 years
- More than 10 years

14. I live in:

- Colebrook area** (includes: **NH**: Clarksville, Colebrook, Columbia, Dixville Notch, Errol, Pittsburg, Stewartstown, and Stratford; **VT**: Averill, Beecher Falls, Brunswick, Canaan, Lemington, and Norton)
- Lancaster area** (includes: **NH**: Dalton, Groveton, Jefferson, Lancaster, Stark, Twin Mountain, and Whitefield; **VT**: Bloomfield, Concord, Gilman, Lunenburg, and Maidstone)
- Littleton area** (includes: **NH**: Bath, Bethlehem, Easton, Franconia, Sugar Hill, Lincoln, Lisbon, Littleton, Monroe, and North Woodstock; **VT**: Lyndonville, St. Johnsbury, and Waterford)
- Berlin area** (Includes: Berlin, Dummer, Errol, Gorham, Milan, Randolph, and Shelburne)
- Other (please specify):

7. Community Key Informant Insight

15. What are the challenge(s) that you see in the healthcare system or in the community that affect your line of work?

16. What new or existing programs or services could be implemented or enhanced to improve the health of residents in the community?

17. Why do you choose to work, practice, or serve in the community?