

Ammonoosuc Community Health  
Services  
Littleton Regional Hospital  
North Country Home Health & Hospice



Community Needs Assessment  
Executive Summary  
November 2009



# Methodology

- Analysis of Demographic & Health Data
- Opinions From 175 Community Members
  - 13 Personal Interviews
    - 5 Legislators
    - 8 Key Leaders
  - 59 People in 6 Focus Groups
    - Business Leaders
    - Civic & Health Organizations
    - Physicians
    - School Representatives
    - Seniors
    - WREN Members
  - 103 Web Survey Respondents



# Top Issues That Should be Addressed

- **Alcohol/drug use problems** 58%
- **Elderly health, housing, other services** 47%
- **Mental health problems** 40%
- **Dental care** 31%
- **Heart disease and stroke** 29%
- **Primary care for adults** 27%
- **Home healthcare** 27%
- **Domestic violence** 24%
- **Diabetes** 23%
- **Access to prescription/over the counter drugs** 21%

Source: Focus Groups / Key Leader Interviews



# Top “Risky Behaviors”

- **Overweight / Obesity** 82%
  - Lack of exercise 61%
  - Poor eating habits 55%
- **Substance Abuse**
  - Alcohol abuse 79%
  - Tobacco use 66%
  - Drug abuse 42%

Source: Focus Groups / Key Leader Interviews



# Top 3 Reasons Not Able to Access Health Services

- **Lack of Insurance**
  - Do not have health insurance 76%
  - Do not have dental insurance 52%
- **Cannot Afford Care**
  - Cannot afford to pay at time of service 58%
  - Cannot afford deductible/co-pay 44%
  - Payment of balance due required 21%
- **Cannot Access Care**
  - Do not have a regular doctor 36%
  - Lack of transportation 29%
  - Could not take time off from work 26%
  - Not knowing how or when to seek care 26%
  - Too long to wait for an appointment 23%

# Sometimes/Never Able to Access Care When Needed in Last 2 Years

■	Dental Treatment/Prevention	16%
■	Sick Care in Doctor's Office	12%
■	Health Care	9%
■	Well Care in Doctor's Office	
■	X-Rays	
■	ER Care	
■	Physical/Occupational Therapy	
■	Lab Work	
■	Prescriptions	7%
■	Health Care	4% or Less
■	Mental Health Counselor	
■	Alcohol or Drug Counselor	
■	Sleep Disorder	
■	Cancer Treatment	
■	Nursing Home	
■	Adult Day Care	
■	Assisted Living	
■	Hospice Care	
■	Eating Disorder	

Source: Consumer Web Survey  
79% educated with some college or more



# Summary of Demographic & Health Data

## ■ **Demographics of 30,000 People**

- Older and Aging Population = Increasing Demand for Health Services; By 2030, 1/3<sup>rd</sup> of Grafton County Population Will be 65+ Years Old
- High Percent of Uneducated Adults
- High Percent of Individuals Living in Poverty
- Over 9,000 Disabled

## ■ **Health Status of Population**

1. High Percent of Uninsured
2. High ED Use for Injuries and Respiratory Conditions
3. High Maternal Risk Factors and Teen Birth Rate
4. High Chronic Illness - Diabetes, Asthma and Poor Health Status

## ■ **Community Health Status Concerns Supported by Data**

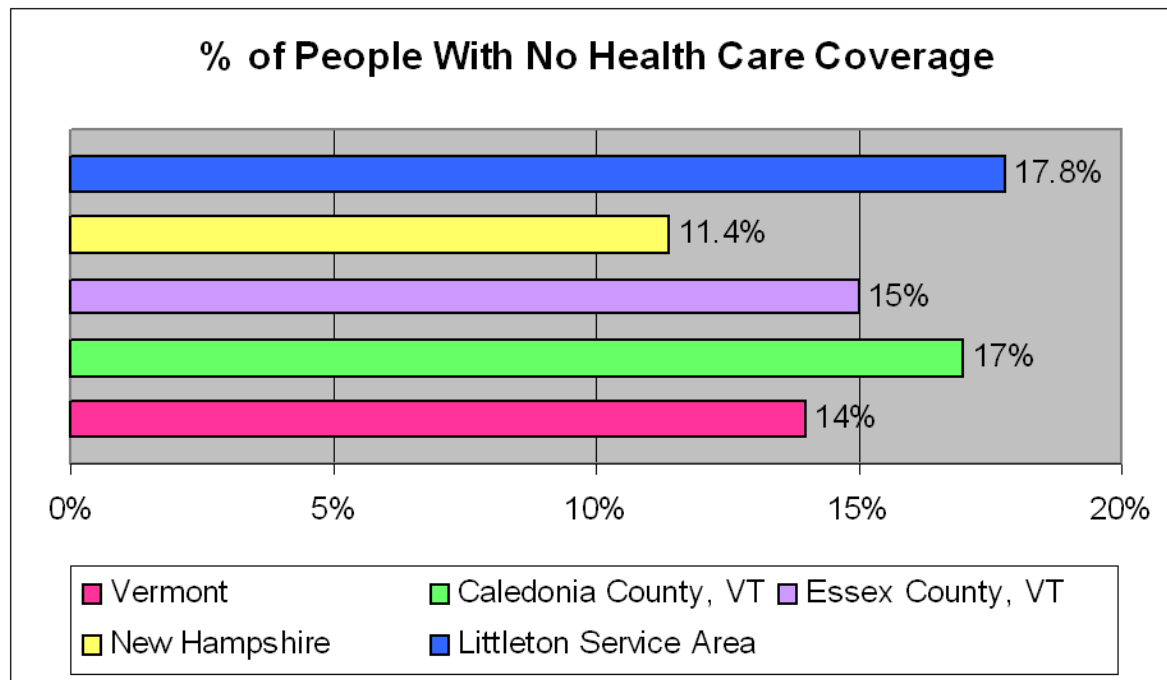
1. Lack of Access to Primary Care
2. Substance Abuse
3. Obesity and Overweight High Percent of Uninsured
4. High Death Rate for Heart Disease and Total

# High Percent of Uninsured

Much Higher Rates of Uninsured Than NH (11.4%) or VT (14%)

Littleton Service Area 17.8% Uninsured

Caledonia County 17.0% Uninsured



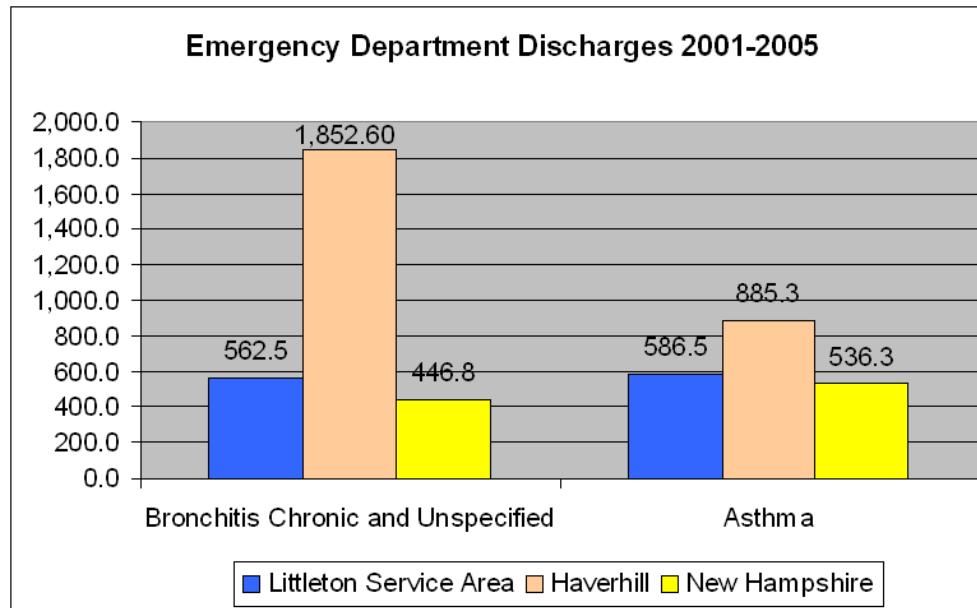
Source: NH Adult Behavioral Risk Factor Surveillance System, 2005-2006, NH Department of Health and Human Services, Division of Public Health Services, Bureau of Disease Control and Health Statistics, the Health Statistics and Data Management Section and Vermont Source: Health Status of Vermonters, Appendix, 2008, Vermont Department of Health



# High ED Use For Injuries and Respiratory Conditions

A high volume of recreational injuries and lack of primary care access contribute to statistically significantly higher ED discharge rates than NH for:

**Littleton and Haverhill:** **Total Visits** (46,555.5 and 76,579.1 vs. 40,572.2)  
**Unintentional Injury** (14,016.7 and 17,622.5 vs. 11,419.9)  
**Chronic Bronchitis**  
**Haverhill Only:** **Asthma**

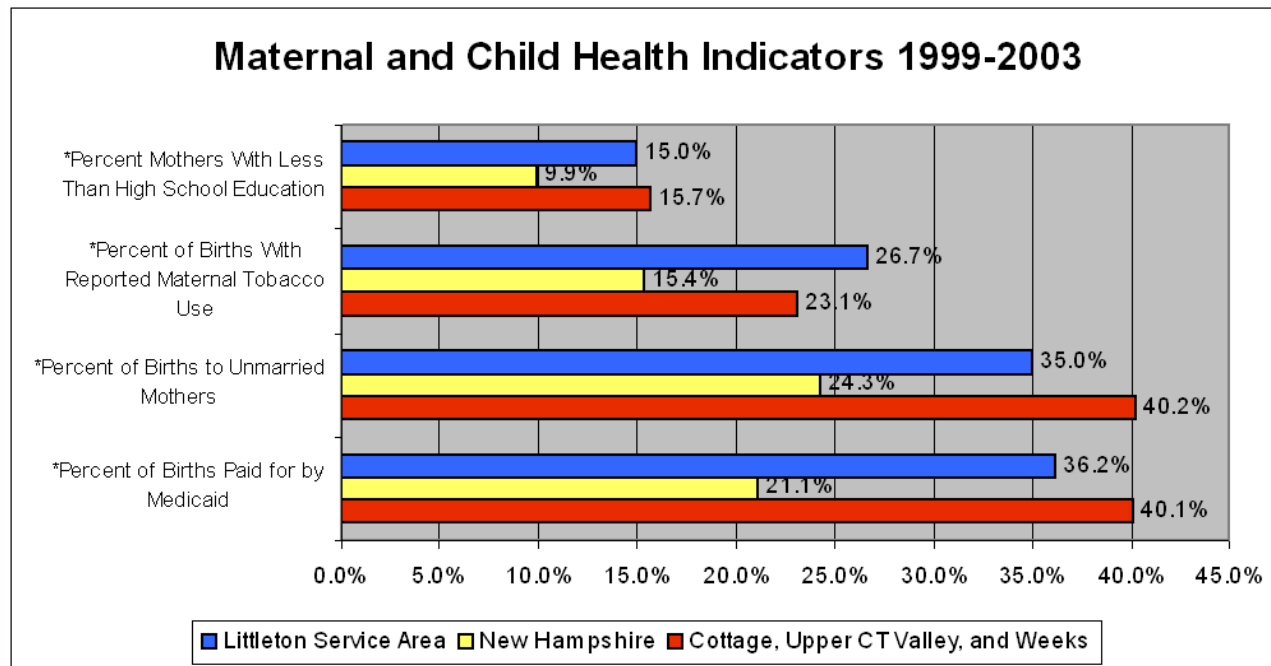


Source: NH Department of Health and Human Services Hospital Discharge Data Collection System, 2001 – 2005, Discharges per 100,000 population

# High Maternal Risk

Area hospitals have statistically significantly higher rates of indicators that may result in poor pregnancy outcomes:

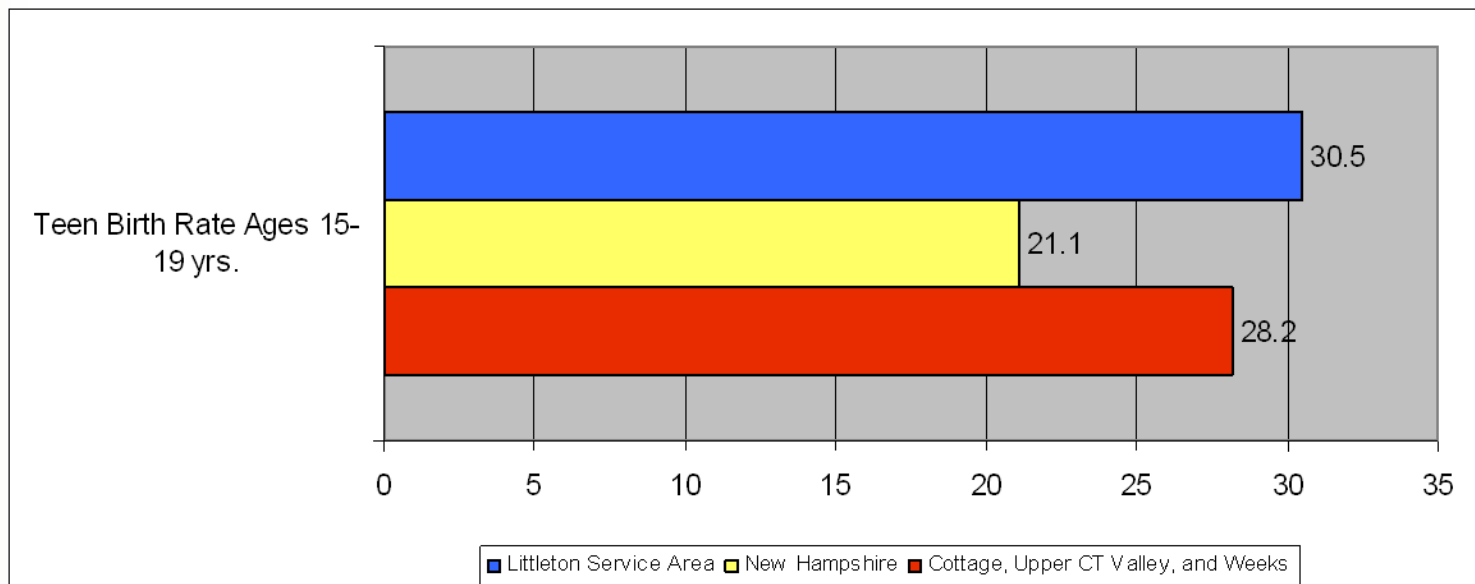
- Less Educated
- Prenatal Smoking
- Unmarried
- Medicaid Births



Source: NH Department of Health and Human Services, Division of Vital Records Administration birth certificate data, 1999 – 2003

# High Teen Birth Rate

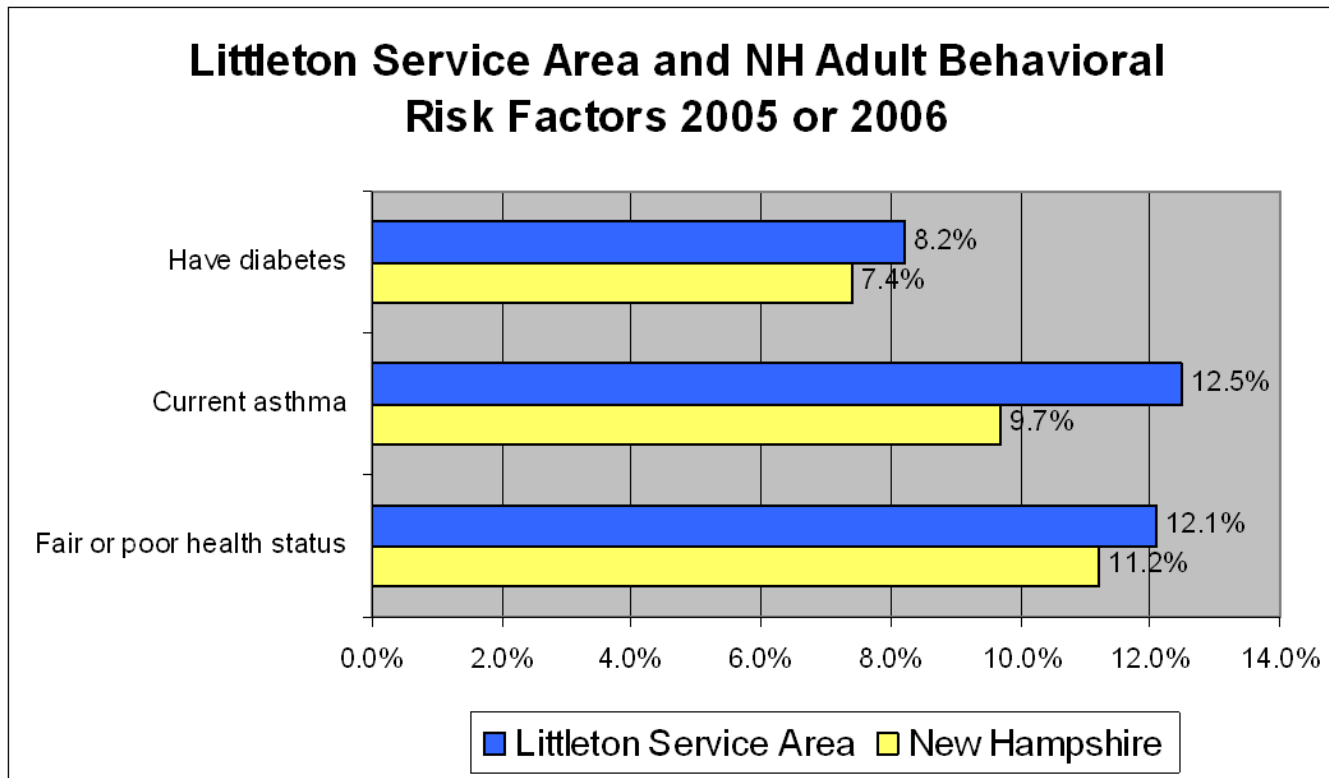
is statistically significantly higher than NH



Source: NH Department of Health and Human Services, Division of Vital Records Administration birth certificate data, 1999 – 2003. Birth Rate per 1,000 Teens 15-19 years and Birth Rate per 1,000 Women 15-44 years

# High Chronic Illness

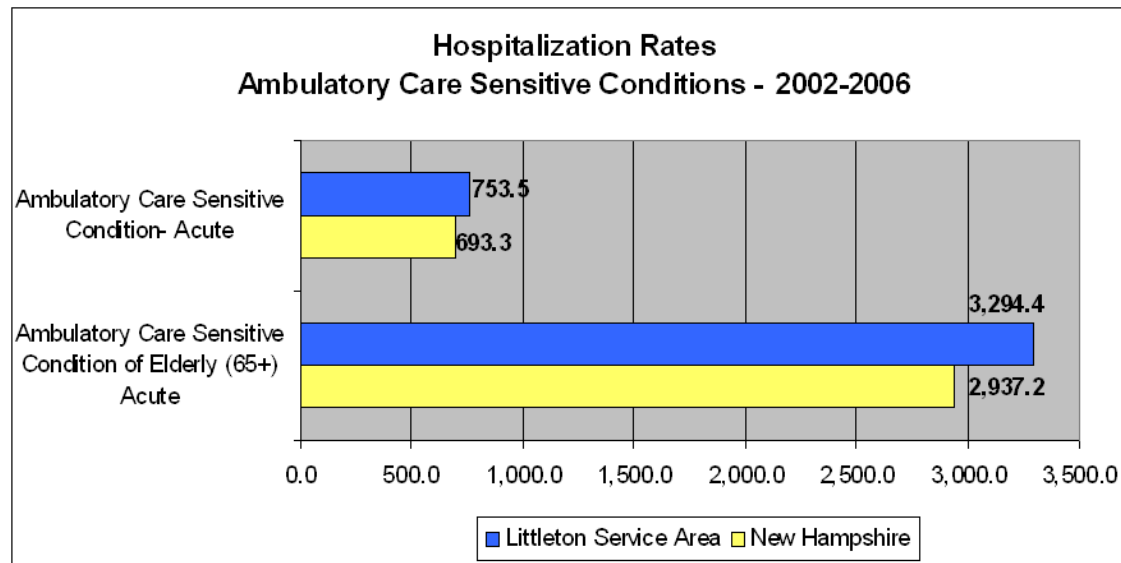
Littleton Service Area adults are somewhat more likely to have diabetes, asthma and fair/poor health status than NH residents



Source: NH Adult Behavioral Risk Factor Surveillance System, 2005-2006, NH Department of Health and Human Services, Division of Public Health Services, Bureau of Disease Control and Health Statistics, the Health Statistics and Data Management Section

# Lack of Access to Primary Care

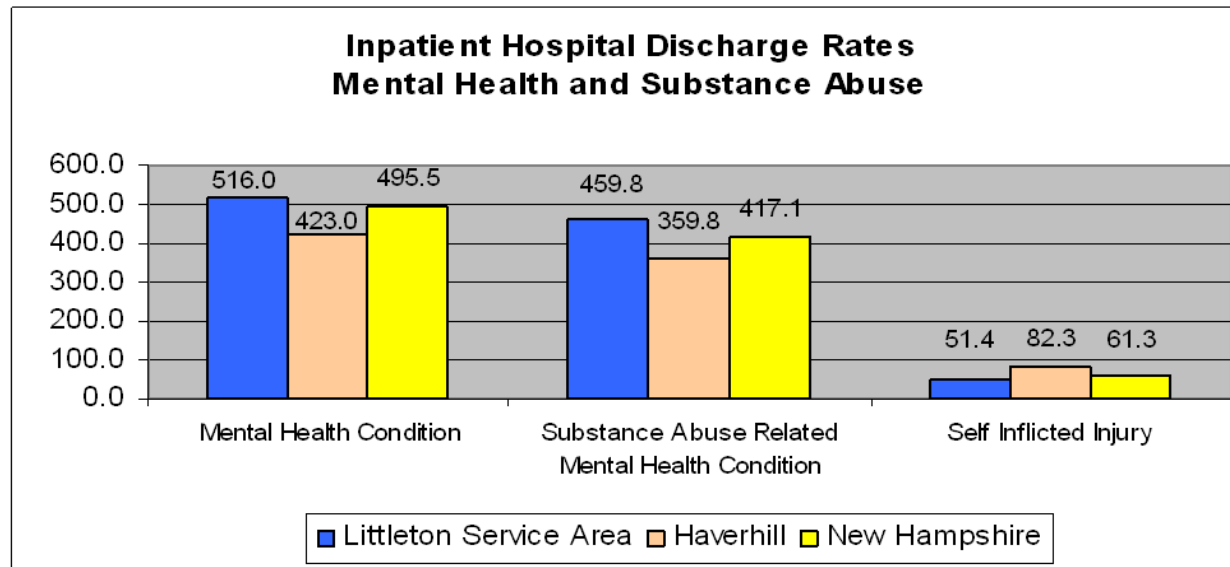
- Littleton Service Area has statistically significantly higher rates of hospitalization for some conditions that are less likely to require hospitalization if timely and appropriate primary care is received.
- Over 1 of 5 residents of Essex County (21%) does not have a usual PCP, statistically significantly worse than Caledonia County or Vermont (15% and 13%, respectively).



Source: NH DHHS Hospital Discharge Data Collection System. Inpatient Discharges per 100,000, 2002 – 2006 and Health Status of Vermonters, Appendix, 2008, Vermont Department of Health

# High Rates of Substance Abuse

- Littleton Service Area Has a Statistically Significantly Higher Rate Of Inpatient Discharges For Substance Abuse Than NH

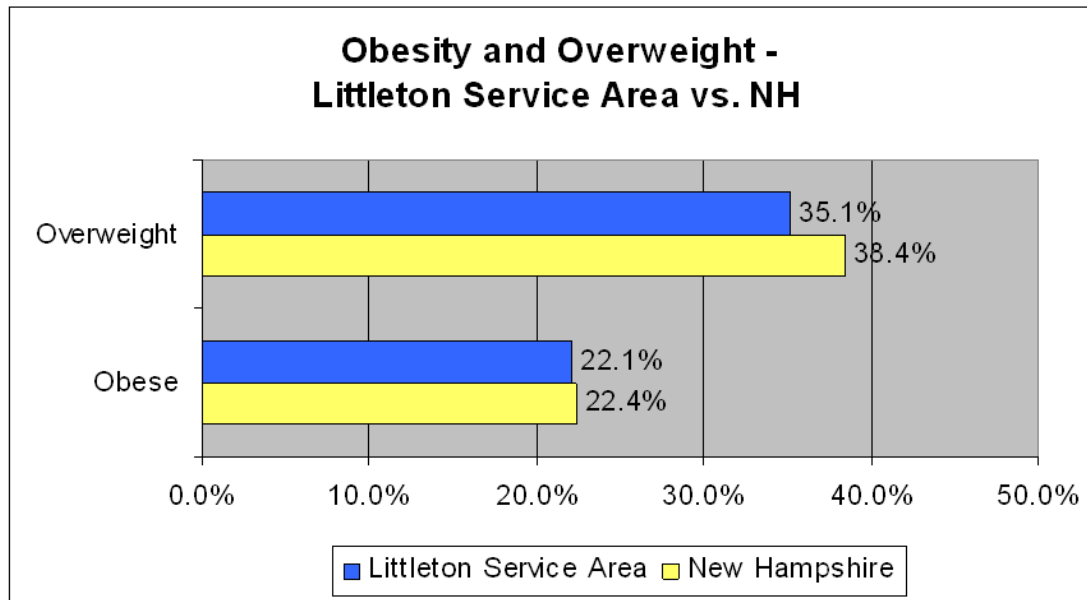


Source: NH Department of Health and Human Services Hospital Discharge Data Collection System, 2002 – 2006 (Substance Abuse ICD 9CM codes 291, 292, 304, and 305. Mental Health ICD 9CM codes 290-319.) Rates are per 100,000 population.

# Obesity & Overweight

## Major Concerns in the Littleton Area

- Over 1 in 3 adults are overweight
- Over 1 in 5 adults are obese
- Almost 3 of 5 adults are either overweight or obese

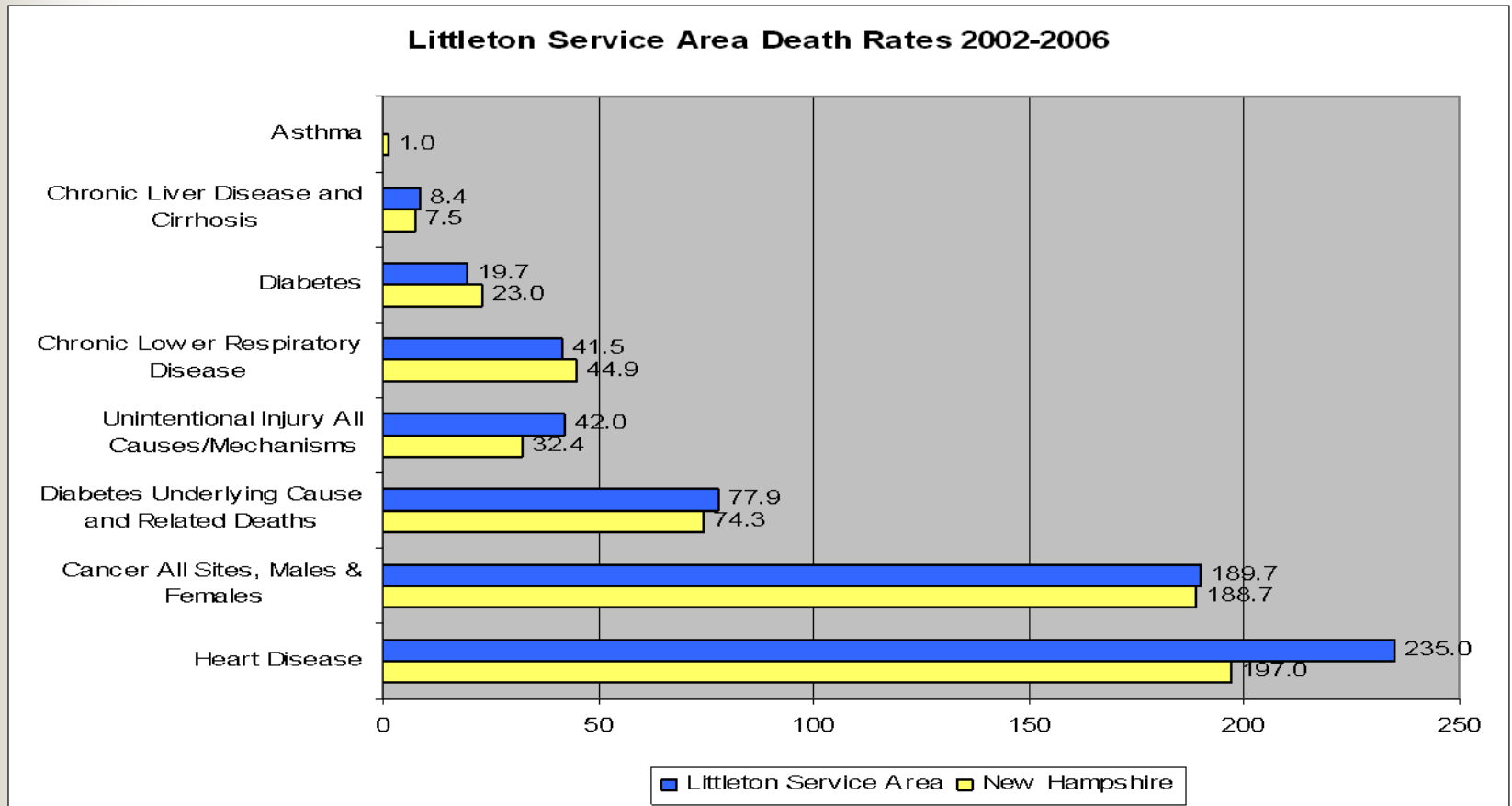


Source: NH Adult Behavioral Risk Factor Surveillance System, 2005-2006, NH Department of Health and Human Services, Division of Public Health Services, Bureau of Disease Control and Health Statistics, the Health Statistics and Data Management Section

# Significantly Higher Heart Disease & Total Death Rates

Littleton Service Area for heart disease (235 vs. 197)

Haverhill Service Area for total deaths (868.7 vs. 749.8)



Source: NH Department of Health and Human Services Hospital Discharge Data Collection System, 2002 – 2006, Deaths per 100,000 population





# Community Spirit and Services

## ■ Community Spirit Strengths

- Help ourselves
- Social capital
- Multitude of volunteers
- Charitable giving
- Ethnic diversity
- Community support for athletics
- Scholarships
- Student community service projects

## ■ Community Services Strengths

- Many organizations listed
- Excellent social/public services
- Strong police and fire services

## ■ Community Services Weaknesses

- Number of police and fire inadequate; Fire Department is “grossly undermanned”
- Weak coordination of youth services
- Disabled lack access to buildings, bike and walk paths, etc.

# Health Services

## ■ Strengths

- More than expected access for town this size
- Continuum of care
- Easy access to LRH / regional network of hospitals and physicians
- DHMC world class / resources / proximity
- Community based care / trust / empathy / relationships
- Ammonoosuc & White Mt. Health Services
- Full time school nurses
- Increased public communication
- Good leadership

## ■ Weaknesses

- Health insurance lack of/ burden to small employers/not portable/young adults
- Cost due to obesity, smoking, etc.
- Lack of collaboration and communication makes navigation complicated and confusing / silos of care
- Lack of knowledge about resources available
- Duplication of services / redundancies
- No pharmacies open at night
- Reactive, not preventive
- 3<sup>rd</sup> party / government interference
- Veterans Care clinic closed



# Medical Care

## ■ Strengths

- Care for those without resources / Ammonoosuc a “godsend” / top 3% in quality indicators / great service / “old fashioned care”
- PCP quality / commitment / availability
- Hospital recruiting new doctors
- Communication among doctors
- MD efforts to improve health
- Core of stable doctors
- Subspecialties available
- Excellent OB care / staff “amazing”

## ■ Weaknesses

- Not enough PCPs / long wait times / desperately need / “ambulance calls for primary care”
- PCP turnover / can jeopardize quality / missed referrals, e.g.
- Not enough pediatricians
- Lack of walk-in clinics / no walk-ins at Ammonoosuc
- Unnecessary office visits, when not enough appointments
- Misunderstanding role and value of physician extenders
- Gaps in specialties, e.g., geriatric physician

# Littleton Regional Hospital

## ■ Strengths

- Easy access
- Quality, excellent care
- Well staffed, committed
- Great service
- “Huge asset” to town
- “Impressive” facility
- Proactive vision & management
- Financially stable
- “Phenomenal job” in community outreach
- Many community health services

## ■ Weaknesses

- LRH quality/ reputation
- “Worthless” security company
- Nursing understaffed & overworked
- “Lousy” billing system
- Stressed atmosphere
- Spiritual care & social work lacking
- Workers Comp program could be improved
- Visibility and outreach
- Nursing retention
- Fragile financial structure
- Construction while laying off employees/PCP access
- Not competitive enough



# Obesity and Overweight

## ■ Strengths

- Beautiful area
- Large community of active people
- Free exercise
- “One of America’s Top Ten Dream Towns”
- Insurance reimbursement for healthy lifestyles
- Kid safe to play outside

## ■ Weaknesses

- Unhealthy habits
  - Obesity/overweight
  - Eating habits
  - Sugar drinks
  - Sedentary
  - Not enough school physical education
  - Technology
  - Stress
- Inertia
- Geography

# Mental Health & Substance Abuse

## ■ Strengths

- White Mt. Mental Health Services
- Positive comments about the mental health and substance abuse system
- Methadone Treatment

## ■ Weaknesses - Lifestyles

- “Latte & cigarettes”
- Drinking and drugs
- Prescription drug abuse
- Culture issues re drunk driving

## ■ Weaknesses - Services

- Inadequate services
- Lack parity
- Unfunded / hard to access appointments
- No Cancer counseling
- No community social services
- Lack of psychiatric care – adult and child
- Sliding scale to \$15 can still be a barrier
- Jail rather than treatment
- Lack of inpatient psych / detox beds
- No geropsych care



# Senior Services

## ■ Strengths

- Long term care
- Assisted living at Grafton County nationally recognized
- Riverglen
  - HCBC provider
  - Focus on wellness/exercise
  - Meals
  - Transportation

## ■ Weaknesses

- No affordable assisted living
- Alzheimer's residential only at the County
- Gap between nursing homes and home services
- Advocacy for seniors
- MD communication
- Over medication
- LRH “missing the boat” in senior services
- Senior Center constrained by building / needs to expand

# Emergency Medical Services

## ■ Strengths

- LRH Emergency care is a strength
- Good system of triage
- Extraordinary/excellent
- Voluntary ambulance service
- Wait times not more than an hour

## ■ Weaknesses

- Long waits in the ER
- Staff more concerned about paperwork than care
- Inadequate staffing of 9 trauma rooms
- Poor coordination among EMS responders/not hospital based/antiquated system/quality not tested
- No EMS rotations through ER
- Expensive ER visits





# Other Services

## ■ Dental Strengths

- Dental surgeons
- Molar Express
- Number of dentists

## ■ Dental Weaknesses

- Long waits
- Services not available
- Not enough dentists
- No low cost dental
- Don't accept NH  
Healthy Kids/Medicaid

## ■ Home Health Strengths

- Access 3 locations
- Hospice a strength
- North Country Home Health well respected and well run
- One of the “best in the state”

## ■ Home Health Weaknesses

- Too many vendors
- Lack of homemaker services



# Conclusion

- 4 Community Priorities:
  - Obesity and Overweight (related to heart disease)
  - Primary Care Access
  - Mental Health and Substance Abuse
  - Elderly Health, Housing and Community Based Services

# Community Priority Suggestions

(continued)

- **Obesity and Overweight**
  - Communicate/educate community
  - More outreach
  - Community wide plan for healthy lifestyles
  - Incentives – social, money, support groups, ??
  - Start young to develop habits/change culture
  - Strengthen PE curriculum in schools
  - Free / low cost exercise programs
  - Medical providers/adults/hospital as role models
  - Healthy food options/grocery store, job, schools
  - Walkable community/open land access for trails
  - Littleton Recreation Center
  - Open schools 8 - 5

Source: Focus Groups / Key Leader Interviews



# Community Priority Suggestions

## ■ Primary Care Access

- Stabilize primary care physician staff
  - Retool the mission to PCP access
  - Focus on preventive care
  - Spend less on specialists
- Implement Urgent Care / Walk-In Service
- Increase collaboration/coordination of care
  - Integrate services
  - Computerize records
  - Reduce duplication
  - One stop shopping like Plymouth model
  - Education Center “How to Use Available Services and Insurance Benefits



# Community Priority Suggestions

(continued)

## ■ **Mental Health and Substance Abuse**

- Continue funding alcohol programs
- Fund prevention
- More collaboration with the schools
- Reduce overuse of prescription drugs

## ■ **Elder Services**

- System of calls to over 65 year olds/isolated
- Education about Riverglen



# Other Community Suggestions

- **Emergency Care**
  - Separate ED area for mental health patients
  - Regional EMS plan
  - Forum Workshop to reduce ER use
    - Most frequent and preventable employee use
    - Ways to influence healthy behavior
    - Obtain mid management buy-in
  - Expand and improve the Paramedic Intercept Program
- **Dental Care**
  - Integrate dental care with primary care
  - Molar Express in Littleton
  - Increase knowledge of dental impact on overall health
  - Dentists organize an on call system
  - Hire a salaried dentist for Medicaid population
- **Home Health Care**
  - Palliative care partnership with Ammonoosuc
- **Specialty Care** – increase access in specific specialties

Source: Focus Groups / Key Leader Interviews