

## **2003 Capital Region Community Health Needs Assessment Report Executive Summary**

**Introduction and History.** Since 1994, and prior to the enactment of community benefit legislation, Concord Hospital has collaborated with other organizations to assess and address Concord region community health needs. In 1994 and 1998, the highest priority health needs identified were accessible and affordable health and access to information about health services, as well as adolescent health, school persistence, and parent education. The 2000 assessment identified five high priority community health needs: prescription drug assistance, smoking and substance abuse programs, dental care, behavioral health programs, and motor vehicle injury prevention. In 2003, Concord Hospital and its affiliated partners undertook another systematic assessment of the health needs of the community. While earlier versions of this effort drew heavily upon the work of external researchers, the 2003 effort was designed, implemented, and reviewed by a work group of internal stakeholders selected from among those who would be most closely involved with the design and implementation of plans to address the community health needs revealed by the assessment. Group members represented several Concord Hospital departments, Concord Regional Visiting Nurse Association, Riverbend Community Mental Health, Dartmouth-Hitchcock Concord, Community Provider Network of Central New Hampshire and the City of Concord.

**Methodology.** The work group decided to undertake several separate types of data collection processes to build a comprehensive picture of community health needs. These were: stakeholder interviews with key community leaders and representatives; focus group meetings with key community groups in our service area; an analysis of state, regional, and organizational data sets concerning health needs, service utilization, and behavior risk patterns; and a telephone survey and a written consumer survey to assess the needs and service utilization of community members.

**Findings.** The primary health needs of the community that emerged from the 2003 assessment were identified through several of the methodologies employed. They were:

***Health Service Needs.*** Affordability of health care was an overarching health issue, especially for the uninsured and underinsured members of the community. Affordability and access to the following health services were the most important unmet or incompletely met health service needs:

- Mental health
- Substance abuse prevention and treatment
- Dental care, for routine and emergency care, and for prevention
- Prescription assistance

***Health Education/Prevention and Health Information Needs.*** There were also significant unmet or only partially met needs for:

- Ready access to information about the health services that are available in the community
- Health education for prevention overall, smoking, obesity, and parenting education
- Injury prevention, especially among the elderly and for work-related injuries

Also, there was some direct evidence that health needs are currently being met more successfully for most residents of the community than in the earlier assessments.

**Plans.** The results of the community health needs assessment will be disseminated to the broader community and will be the focus of future planning for both continuing and new programs by the front-line planners and managers of the hospital and its affiliated partners for the 2005 fiscal year and beyond. Select new and continuing programs will be approved, implemented and evaluated based upon their fit with these identified community health needs.

These are the ongoing programs and services and future plans for addressing the identified health needs from the 2003 Assessment:

***Health Service Needs:***

- Affordability and Access to Health Care:
  - ❖ Primary Care regardless of ability to pay (CRFHC)
  - ❖ Primary Care regardless of ability to pay (DHC)
  - ❖ Charitable Care for Emergency and Inpatient Care (CH)
  - ❖ Senior Health, Flu and Immunization Clinics (CRVNA)
  - ❖ Downtown Health Clinic at St. Paul's Church (CRVNA)
  - ❖ Charitable Primary Care from Family Practice Physicians (CH/CRPG/CRPC)
- Mental Health:
  - ❖ Baby's First Homecoming home visits for post partum depression (CRVNA)
  - ❖ Bereavement Support Groups (CRVNA)
  - ❖ Clinical Consultations (CH/RCMH)
  - ❖ Emergency Services (CH/RCMH)
  - ❖ Post Partum Depression Support Group (CH)
- Substance abuse prevention and treatment:
  - ❖ Concord Substance Abuse Coalition (CPNCNH)
  - ❖ Fresh Start Program (CH/RCMH)
  - ❖ Fresh Start Friends and Family Program (CH/RCMH)
  - ❖ Addiction Free Pain Management (CH/RCMH)
  - ❖ After Care Program (CH/RCMH)
  - ❖ Clinical Consultations in Primary Care Setting (CRFHC/RCMH)
  - ❖ Dually Diagnosed Addicts Program (CH/RCMH)
- Dental care, for routine and emergency care, and for prevention:
  - ❖ Capital Region Family Health Center Dental Services
  - ❖ Oral health promotion and caries prevention services during well child visits (CRFHC)
  - ❖ Dental Clinics for Children (CRVNA)
  - ❖ Restorative dental care for children (CRVNA)
- Prescription assistance:
  - ❖ Added .5 FTE to Prescription Assistance Program in FY2003 (CH/CRFHC)
  - ❖ Medication Bridge Program (DHC)
  - ❖ Expand Prescription Assistance Marketing in FY2004 (CH)
  - ❖ Emergency Medication Vouchers (CRFHC)

***Health Education/Prevention and Health Information Needs***

- Ready access to information about the health services that are available in the community
- Health education for prevention overall, smoking, obesity, and parenting education
  - ❖ Parent Friend Program (CRVNA)
  - ❖ Baby's First Homecoming home visits (CRVNA)
  - ❖ Community Education Programs (CRVNA)
  - ❖ Health Education Programs (DHC)
  - ❖ Parenting, Weight Management and Obesity Programs (CHP)
  - ❖ Meet with physician office practices to explain educational programs. (CHP)
  - ❖ Provide more information and health tips to physician practices. (CHP)
- Injury prevention, especially among the elderly and for work-related injuries
  - ❖ Prenatal Car Seats for those who cannot afford (CH-The Family Place)
  - ❖ Car Seat Inspection Stations (CHP)
  - ❖ Home Safety Evaluations and Fall Risk Assessments (CRVNA)
  - ❖ Fall Risk Screening for Seniors (CHP)
  - ❖ Sponsor Play to Address Issue of Senior Falls, Safety (CH in collaboration with the NH Falls Risk Reduction Task Force)