Community Health Needs Assessment

Implementation Strategy

November 15, 2019

Elliot Health System

WE ARE SOLUTIONHEALTH

Section A. Introduction and Overview

In 2019, Elliot Health System ("EHS") (which operates Elliot Hospital of the City of Manchester) and Catholic Medical Center, in conjunction with the Public Health Department for the City of Manchester, conducted a Community Health Needs Assessment ("CHNA") pursuant to requirements of Section 501(r) of the Internal Revenue Code. Through an examination and evaluation of various social determinants of health, the CHNA identified and prioritized the critical health needs facing Greater Manchester. The CHNA findings were approved by the EHS Board and were made available on Elliot Hospital's website on June 30, 2019.

In response to the CHNA, EHS has developed this Implementation Strategy, also required by Section 501(r), to document the efforts Elliot Hospital intends to undertake to address the prioritized community health needs identified in the 2019 CHNA. This Implementation Strategy also includes additional activities to be undertaken by certain other EHS entities, which are consistent with and will help to support the overall effectiveness of the initiatives to be undertaken by Elliot Hospital. This Implementation Strategy has been approved by the EHS Board of Directors and is a snapshot in time, based upon information currently known to EHS. Because the needs of the community are ever-evolving and programs and partnerships are dynamic in nature, EHS may edit this Implementation Strategy, as well as revise the initiatives it intends to undertake, in an effort to enhance the efficacy and impact of its response to the needs of the community identified in the CHNA.

Community Heath Needs

The CHNA contains nearly 200 pages of information concerning the health of Greater Manchester and identifies a significant number of communities needs to be addressed. Below are the primary community health needs as identified and prioritized in the recent CHNA:

1. Social & Economic Factors – Improving educational outcomes for kids, including by addressing absenteeism, reading proficiency, and graduation rates.
2. Health Behaviors – Preventing substance misuse, including opioid use, vaping, and alcohol abuse, as well as increasing health education to support healthy behaviors and minimizing impacts of unintentional accidents.
3. Clinical Outcomes – Improving access to care, including by managing ambulatory care sensitive conditions outside of the emergency department and providing access to dental care, pre-natal care, and screening for the management of disease and chronic conditions such as asthma, diabetes, and obesity.
4. Physical Environment – Improving access to quality housing, including addressing lead-paint exposure and homelessness.
5. Health Outcomes & Opportunities – Preventing and addressing trauma, including mental and physical distress, as well as child abuse and neglect.

Following the conclusion of the CHNA, the City convened a meeting of community leaders and organizations from across many disciplines – including non-profit health care, education, banking, real estate development, charitable organizations, and municipal services – to discuss the significant needs identified and the need for a multi-faceted community response. EHS participated in that discussion and continues to meet with various community partners to evaluate ways to address the complex needs of the community and the ever-increasing burden to needs are placing on resources in the community.

Our Perspective & Our Partners

EHS, in this Implementation Strategy, re-affirms its commitment to supporting certain high-need populations, based upon the explicit and specific findings of the CHNA. In that way, as part of its Implementation Strategy, EHS, primarily through Elliot Hospital, intends to continue its support and future expansion of critical programs related to trauma care, behavioral health, and substance misuse. In addition, it will continue to support and expand programs designed to address preventative health and screening, including related to asthma, diabetes, and cancer, as well as care for seniors. EHS will also work to identify and support impactful programs designed to support the health needs of children and to improve their lifestyle choices that will continue to impact and influence their overall health as they grow into adulthood.

The Implementation Strategy identifies those community partners who are important collaborators in the work and initiatives undertaken by EHS. Specifically, partners with whom EHS has historically worked to address needs, as well as those entities with whom EHS may partner in new ways are identified. As the community continues its collective and multi-faceted approach to addressing the sweeping community needs identified in the CHNA, EHS will continue to evaluate and explore relationships with community partners.

Implementation Strategy Structure & Substance

This Implementation Strategy contains two parts. The first portion is an "Impact Key" (s*ee* Section B) that divides the needs identified by the CHNA into 3 categories: 1) community needs EHS believes it can impact or influence by direct activities (labeled green), 2) community needs EHS believes it can impact or influence indirectly (labeled yellow), and 3) community needs EHS does not believe it is currently positioned to address or influence for one reason or another (labeled red).

The second portion of the Implementation Strategy, labeled as an "Activities Plan" (s*ee* Section C), identifies the specific activities EHS, primarily through Elliot Hospital, intends to undertake and/or support to address the community needs EHS can influence/impact directly and

indirectly. The Activities Plan lists those programs in which EHS will continue to invest, as well as newly-identified initiatives that are responsive to and result from the CHNA.

In the Activities Plan section of the Implementation Strategy, EHS re-affirms its long-term commitment to addressing substance misuse, behavioral health needs, and traumatic injuries in the communities. In addition, EHS is continuing its efforts to support underserved populations through strategic partnerships with other organizations, such as Amoskeag Health, Manchester's Federally Qualified Health Center. Given EHS's robust pediatric presence in the community, the Activities Plan also reflects how EHS will expand its efforts to improve health and wellness for kids through development of initiatives aimed at encouraging healthy life choices among school-aged children. For example, through a strategic partnership with the Public Health Department, EHS is developing and supporting initiatives to provide important and relevant health information to kids, as well as to foster healthy lifestyle and leadership choices among school-aged children. The remainder of the Activities Plan describes how EHS will continue to amplify its portfolio of specific healthcare services for the aging population and those likely to suffer from the leading causes of death, such as cancer.

The needs identified in the CHNA that EHS is not addressing (*see* Impact Key) are not listed in the Activities Plan. Those needs are not being addressed because they are generally beyond the core of EHS's mission to inspire, to heal, and to serve in connection with delivery of healthcare services to the community and, as a result, EHS does not offer the specific subject matter expertise to craft initiatives to squarely address those needs. As a practical matter, for those needs not addressed in the Activities Plan, other community partners, including municipal entities, are better positioned to directly impact and influence improvements to address those needs. Nevertheless, EHS will continue to explore ways to align with partners to positively impact and contribute to improving community health.

Section B. Impact Key

The table below lists the social determinants of health and key indicators that comprise the prioritized community needs as identified in the CHNA as well as a description of EHS's current ability to influence and address these needs.

Impact Level	Description
🟢	Impact or influence by direct activities
🟡	Impact or influence indirectly
🔴	Not positioned to address or influence

CHNA Chapter	Goal Areas	Impact
3	**Social and Economic Factors**	
	Factor 1: Education	
	- Early Childhood Education (Preschool and Kindergarten)	🔴
	- Academic Proficiency	🟡
	- Absenteeism	🔴
	- Special Education Needs	🔴
	- Students with Limited English Proficiency	🔴
	- Homelessness Among Students	🔴
	- High School Graduation	🔴
	- Adult Education Achievement	🔴
	Factor 2: Employment	🟡
	Factor 3: Income	
	- Household Income	🔴
	- Poverty	🔴
	- Children and Families in Poverty	🔴
	Factor 4: Family and Social Support	
	- Single Parent Households	🔴
	Factor 5: Community Safety	
	- Violent Crime Rate	🟡
	- School Safety	🔴
4	**Health Behaviors**	
	Factor 1: Alcohol & Drug Use	
	- Excessive or Binge Drinking	🟢
	- Underage Drinking	🟢
	- Opioid Misuse	🟢
	Factor 2: Diet & Exercise	
	- Adult Obesity	🟢
	- Youth Obesity	🟢
	- Adult Physical Inactivity	🟢

	- Youth Screen Time Use	🟢
	- Insufficient Sleep	🟢
	Factor 3: Tobacco Use	
	- Adult Tobacco Use	🟢
	- Youth Tobacco Use	🟢
	Factor 4: Sexual Activity	
	- Teen Birth Rate	🟢
	- Sexually Transmitted Infections	🟢
5	**Clinical Care**	
	Factor 1: Adequate Access to Care	
	- Medically Underserved Areas (MUAs)	🟢
	- Uninsured	🟢
	- Preventative Healthcare	🟢
	- Ambulatory Care Sensitive Conditions	🟢
	- Acute Health Care Access	🟢
	- Dental Care	🟢
	Factor 2: Quality of Care	
	- Health Screenings	🟢
	- Prenatal Care in the First Trimester	🟢
6	**Physical Environment**	
	Factor 1: Housing	
	- High Potential Lead Risk	🟡
	- Crowding (Housing Units)	🔴
	- Excessive Housing Costs	🔴
	- Vacant Housing	🔴
	Factor 2: Transportation	
	- Personal Vehicle Access	🟡
	- Walkability	🔴
	Factor 3: Health Promoting Assets	
	- Access to Healthy Foods	🟡
	- Park Access	🔴
7	**Health Outcomes & Opportunities**	
	Factor 1: Length of Life	
	- Life Expectancy	🟢
	- Premature Death	🟢
	- Leading Causes of Death	🟢
	Factor 2: Quality of Life	
	- Adverse Childhood Experiences	🟢
	- Frequent Physical and Mental Distress	🟢
	- Child Abuse and Neglect	🟢
	Factor 3: Persistent Poverty and Limited Opportunity	
	- Persistent Poverty	🔴
	- Current Levels of Opportunity	🔴
	- Future Opportunity for Children	🔴
	Factor 4: Aging Population	🟢

Section C. Activities Plan

1. Social and Economic Factors

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Academic Proficiency	3rd Grade Reading Proficiency	Expand participation of pediatric practices in Reach Out & Read type program which incorporates books and the importance of early literacy into pediatric care delivery for young children.	Support early childhood literacy and enhance the foundation for reading proficiency	Financial and cost of books	# of books given out in practices	
Employment	Stable Employment	Continue partnership with NH Jobs Corps to offer on-site skills training and employment for students in hospitality services.	Improve career training opportunities for low-income youth and young adults ages 16-24	Staff & management training time	# of NH Jobs Corps students trained	NH Job Cops
Community Safety	Violent Crime Rate	Continue providing dedicated Sexual Assault Nurse Examiner (SANE) in emergency department.	Specialized care by trained staff, faster treatment for victims, better evidence collection	Dedicated & trained staff	# patients treated & # trained staff	YWCA

Section C. Activities Plan

2. Health Behaviors

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Alcohol and Drug Misuse	Excessive or Binge Drinking, Underage Drinking and Opioid Misuse	Continue partnership with the NH Judicial branch to operate the administrative and clinical services for the Hillsborough County Drug Court to provide an alternative to incarceration for individuals in the criminal justice system as a result of alleged substance misuse.	Alternative to incarceration to promote recovery from chemical dependency	Program costs	# of graduates	NH Judicial Branch
		Continue Intensive Outpatient Program (IOP) for patients who need a high level of structure to promote recovery but also need the ability to maintain their current daily life activities.	Decrease risk of substance misuse relapse	Program costs	# of patients treated & follow-up outreach to patient after program completion	
		Continue Partial Hospitalization Program (PHP) for individuals with co-occurring mental health and substance abuse disorders.	Decrease risk of substance misuse relapse for patients for whom outpatient treatment is not effective	Program costs	# of patients treated	Network4Health
		Provide Substance Use Disorder (SUD) support in the acute care setting by providing access to an MLADC.	Provide SUD patients in the emergency department or other areas of the hospital with education and the most appropriate treatment and discharge plan	Staff Costs	# of patients treated by MLADC	
		Continue to provide Medication-Assisted Treatment (MAT) services including the integration of these services into certain physician practices and the development of a centralized MAT clinic.	Provide treatment and sustained recovery for substance use disorders	Program costs	# of patients treated	Network4Health

Section C. Activities Plan

2. Health Behaviors

Factor impacting health status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Alcohol and Drug Misuse	Substance Misuse including, Excessive or Binge Drinking, Underage Drinking and Opioid Misuse	Continue partnership in Network4Health, which is Greater Manchester's Integrated Delivery Network designed to address behavioral health needs of the community.	Enable access to affordable, high-quality, and coordinated medical and behavioral health services	Staff costs	Hours of participation on IDN projects	Network4Health
		Continue to maintain software in the emergency department to coordinate care for high utilizers of ED services, including those with substance use disorders.	Support the appropriate discharge planning to improve outcomes	Software maintenance costs	Patients flagged in system	Network4Health
		Accept referrals of individuals for treatment from municipal and state programs designed to address substance misuse, such as the City of Manchester Safe Station program and/or The Doorway NH program.	Provide access to the appropriate care setting for patients seeking addiction treatment through municipal services	Staff time	# of patients treated at Elliot as a result of coordinated care	Safe Station & The Doorway NH
		Continue to advocate for safe disposal of drugs by hosting annual drug take back day, installing permanent safe disposal bins at certain locations, and providing ongoing education regarding safe disposal and bin locations.	Decrease access to prescription drugs and provide community education on prescription medications	Staff time & resources	Amount of medication collected	DEA & Manchester Police Department
		Continue to evaluate and implement evidence-based screening tools to treat patients.	Ability to identify potential substance misuse issues and provide timely and appropriate treatment	Provider time	# of screenings & treatments	

Section C. Activities Plan

2. Health Behaviors

Factor impacting health status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Diet & Exercise	Adult and Youth Obesity	Partner with local grocery stores to educate patients on healthy food choices and dietary needs for certain medical conditions.	Community education for healthy food options and making better choices	Staff time	Education sessions held & demonstrations provided	Hannaford Grocery Store
		Sponsor bicycle program for school-aged kids to promote compliance with elementary school leadership initiatives aimed at positively impacting educational, social, and health choices.	Provides physical activity to kids while enhancing and supporting good education and health choices	Program costs	# of bicycles awarded	Manchester Public Health Department & elementary schools
	Adult Physical Inactivity	Continue to support adult physical activity initiatives by offering use of Welliot, Elliot's gym, to the community and other non-profit organizations to support wellness and physical education programs to the community.	Provide community access to wellness and fitness programs	In-kind donation	Programs offered & in-kind use of space	YogaCaps, Inc.
	Youth Screen Time Use & Insufficient Sleep	Continue to promote and support educational campaigns, such as 5210, to support healthy behaviors and good choices for kids and their parents.	Increase healthy lifestyle choices	Provider time	# patients educated	

Section C. Activities Plan

2. Health Behaviors

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Tobacco Use	Adult and youth Tobacco use and vaping	Provide education and programs to prevent and stop individuals from smoking and vaping.	Decrease smoking and vaping rates	Staff time & training costs	# education sessions held	
Sexual Activity	Sexually Transmitted Infections	Continue chlamydia screening program for sexually active women between the ages of 16-24.	Early and increased diagnosis to prevent long-term health problems	Staff time & provider time	# of screening tests	
Healthy Behaviors (Overall)	Healthy Behaviors (Overall)	Implement the "Doctor's Note" health education initiative to provide important health information to school aged children, teens, and their families.	Improve overall health and healthy choices of the community	Program costs & staff time	# of "Notes" circulated	Manchester Public Health Department & School Department

Section C. Activities Plan

3. Clinical Care

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Adequate Access to Care	Medically Underserved Areas	Continue to provide primary care services in Raymond, NH, a medically underserved area (MUA) as defined by the Health Resources and Service Administration (HRSA).	Increase access to medical services in underserved area	Practice costs	# patients treated	
	Uninsured	Continue partnership with and support of clinical programming offered by Amoskeag Health, Greater Manchester's Federally Qualified Health Center	Increase access to and provide healthcare services to those who are uninsured and underinsured	Financial, provider, & support services	Support provided	Amoskeag Health
		Provide funding for a community health worker to be made available in schools.	Increase access to preventative care	Financial	# of patients served	Amoskeag Health
		Evaluate feasibility of establishing a school based health clinic in elementary school with high need population.	Increase access to care for children and families including those who may be uninsured and under insured	Staff time	Activities associated with evaluation of program	Manchester Health Department, local schools, & Amoskeag Health
		Continue hospital-based care coordination program for veterans through a dedicated case manager.	Ensure veterans have access to quality healthcare and support services	Program costs	# of veterans served	Easter Seals

Section C. Activities Plan

3. Clinical Care

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Adequate Access to Care	Preventative Healthcare (i.e. Vaccines and Cancer screenings)	Maintain and grow (as possible) Care GAP outreach program(s) for patients overdue for preventative care (i.e. colonoscopy, mammogram, etc.) and chronic condition management.	Ensure preventative care and disease management to prevent acute care episodes	Cost of software & staff to manage program	Patients scheduled & seen after care gap outreach	
		Provide cancer screening services including breast cancer, lung caner, colon cancer and others.	Save lives and improves outcomes with early detection of cancer	Program costs	# of patients screened	State of New Hampshire Department of Health and Human Services
		Provide education events on the importance of cancer screening.	Save lives and improve outcomes	Program costs	# of events & attendees	
	Ambulatory Care Sensitive Conditions	Support the Asthma "Breathe Easy Program", which offers home-based education and services to assist adults in the self-management of asthma.	Reduce preventable emergency department visits and hospitalizations for asthma	Financial Support	Reduction in ED usage & hospitalizations, & improvement in asthma symptoms	Manchester Public Health Department
		Continue to host annual Diabetes Fair to provide education on chronic disease management.	Promote disease management	Program costs	# of educational events & # of attendees	

Section C. Activities Plan

3. Clinical Care

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Adequate Access to Care	Acute Care Access	Evaluate and undertake deliberate steps to address the experience of patients seeking care in the emergency department and the delivery of care in that environment, in which there is in increasing demand for services.	Address acute care demand	Program costs	# of patients treated	
		Evaluate and implement as feasible initiatives to enable patients to identify the correct site of care to address needs outside of the emergency department.	Provide appropriate alternatives to emergency department care	Program costs	Programs implemented	
	Dental Care	Offer oral maxillofacial surgical services.	Provide access to care for reconstructive and emergency dental care	Program costs	# of patients treated	
Quality of Care	Health Screenings	Participate in the State's *Let No Woman Be Overlooked* Breast and Cervical Cancer Program (BCCP) by serving as a screening site for Breast and cervical cancer.	Decrease mortality rates from breast and cervical cancer through early detection	Staff time & resources	Patients screened	State of New Hampshire Department of Health and Human Services
	Prenatal Care	Sponsor Healthy Start Home Visiting Program providing pregnant women a minimum of three home visits to support prenatal care.	Improved pregnancy outcomes, improve child and health development and improve maternal life course development	Financial support	# patients in program	Manchester Health Department and Amoskeag Health

Section C. Activities Plan

4. Physical Environment

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Housing	High Potential Lead Risk	Conduct lead screening for children in the first two years of life in pediatrics practices.	Early identification of lead poisoning to minimize health impacts to children	Lab testing	#/ % tested	
		Support VNA Maternal Child Health Program to provide education to parents/ caregivers on lead poisoning and child safety in the home.	Decrease incidence of lead poisoning	Education time	# of patient educated	VNA of Manchester and Southern NH
Transportation	Personal Vehicle Access	Provide transportation home for those in need.	Provide transportation for patients requiring assistance	Cost of transportation	# of vouchers & rides	
Health Promoting Assets	Access to Healthy Foods	Support community access to healthy foods through various programs including food drives and the "Food Box" program.	Increase access to healthy foods	Program costs	Food provided	

Section C. Activities Plan

5. Health Outcomes & Opportunities

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Length of Life	Life Expectancy/ Premature Death	Continue to provide preventative health services, education, support groups and necessary acute care services.	Increase life expectancy/ reduce premature death	Program costs	Life expectancy Rate/ premature death rate	
	Leading Cause of Death	Continue to invest and provide healthcare services to prevent and treat the Leading Causes of Death in the community including diseases of the heart, cancer, accidental injuries, traumas and Alzheimer's disease. *See below*	Increase life expectancy/ reduce premature death	Program costs	Life expectancy Rate/ premature death rate	
	Diseases of the Heart	Continue to provide cardiac services along the continuum of care, including diagnostic testing, interventional cardiology, and disease specific programming such as the Congestive Heart Failure (CHF) program to help patients manage their condition and improve quality of life through education and support services.	Keep CHF patients out of the hospital and minimize visits to the emergency department	Program costs	# of hospitalizations & ED visits	
	Cancer	Develop comprehensive Cancer Center, which provides a suite of services to address screening and diagnosis, multiple modalities of treatment, and supportive care offerings.	Reduce barriers to care, improve timely access to treatment and improve outcomes from cancer patients	Program costs	# of patients treated	

Section C. Activities Plan

5. Health Outcomes & Opportunities

Factor impacting health status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Length of Life	Accidents (unintentional Injuries)	Maintain certification as ACS designated trauma program to provide immediate access to critical care for trauma-related injuries in the community.	Injury prevention	Program costs	# of trauma activations	
		Continue to provide trauma and injury training and education (such as "stop the bleed") in the community, including to first responders, schools, etc.	Injury prevention and life saving trauma education	Program costs & staff time	# education events	
		Continue Bike Helmet program whereby children treated at Elliot Hospital or one of its urgent care centers who do not have access to a bike helmet are provided a voucher for one at a local bike shop.	Injury prevention	Cost of helmets	# vouchers	Bike Barn
		Provide car seat safety and education through trained car seat safety staff, in addition to providing car seats for patients in need.	Injury prevention	Cost of car seat & staff time	# of events & # of car seats provided	
		Support VNA education for all Maternal and Child Health patients in the areas of fire safety, fall prevention, bathroom safety, oxygen safety, emergency preparedness, secondhand smoke, firearm safety, personal safety, and trampolines.	Injury prevention	Staff time & resources	# of patients educated	VNA of Manchester and Southern NH
	Intentional Self-harm (suicide)	Implement the Columbia suicide risk assessment and screening tool in the ED for all patient ages 12+ or those under the age of 12 presenting with behavioral health condition.	Identify patients at risk for suicide and increases probability of providing appropriate real-time intervention	Staff time & resources	# of screening & # of interventions	NH Behavioral Health Clinical Learning Collaborative
	Alzheimer's Disease	*See work in aging population and inpatient services*				

5. Health Outcomes & Opportunities

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Quality of Life	Adverse Childhood Experiences	*See work in Child Abuse and Neglect*				
	Frequent Physical and Mental Distress	Utilize evidence-based depression screening tools and protocols in appropriate physician practices.	Identify patients with depression and provide resources for treatment	Staff time & resources	# of screenings	
		Provide 24/7 behavioral health consults in the acute care setting.	Provide patients access to quality care and identify resources for treatment	Program costs	# of consults	Greater Manchester Mental Health Center
		Continue to serve as a Designated Receiving Facility (DRF) to provide beds in the community for individuals who require Involuntary Emergency Admission (IEA) to treat acute behavioral health needs.	Provide patients access to quality care	Program costs	# of patients utilizing DRF beds	State of New Hampshire
		Continue to offer dedicated space and specialized services through the psychiatric evaluation program (PEP) in the emergency department.	Ability to place behavioral health patients in the appropriate environment in the emergency department	Program costs	# of patients treated	
		Evaluate and implement models of integrated behavioral health care using evidence-based tools.	Improve patient health and patient experience	Program costs	# of patients & # of practices offering integrated behavioral health	Network4Health
		Continue to provide support groups for the community for those experiencing changes/ stressful time in their lives, such as infant loss, new moms, bereavement, cancer care, cardiac health, etc.	Provide support and decrease stress of significant life events	Staff time	# of groups & # of attendees	VNA of Manchester & Southern NH
		Sponsor development of community-based program (i.e., "Zen Den") to support emotional and mental wellbeing of school-age children and teenagers through de-escalation techniques, impulse control options, and the creation of a therapeutic environment.	Support and improve mental distress for school age children and teenagers	Financial support & staff time	# of children utilizing program & reduction in disruptive events	Boys & Girls Club of Manchester

Section C. Activities Plan

5. Health Outcomes & Opportunities

Factor Impacting Health Status	Indicator of Health Status	Action to Address	Anticipated Impact	Resources	As Measured By	Community Partner(s)
Quality of Life	Child Abuse and Neglect	Continue to provide child abuse specialists to support victim needs.	Provide child abuse services in the community	Program costs	# victims identified & treated	Child Advocacy Center of Hillsborough County
		Continue support of Child Advocacy Center of Hillsborough County.	Specialized care for child abuse victims	Financial support	Financial support & provider time	Child Advocacy Center of Hillsborough County
		Continue to provide pediatric SANE nurse specialist in the ED.	Specialized care by trained staff, faster treatment for victims, better evidence collection	Dedicated & trained staff	# patients treated & # trained staff	YWCA & Child Advocacy Center of Hillsborough County
Aging Population	Aging Population	Continue to provide senior specific services and programs for the 65+ population, such as fall prevention programs, dedicated geriatric behavioral health unit, and senior focused fitness programs.	Provide seniors the maximum quality of life and enhanced health outcomes	Program costs	Programs & services offered & projects funded	VNA of Manchester and Southern NH and Community Physicians
		Support the VNA volunteer program designed to provide support services to hospice patients, including the elderly population.	Allow hospice patients to live fully as long as possible	Program costs	# of patients served	VNA of Manchester and Southern NH