

**CCU Health and Wellness Team Notes**  
**14 July 2010**

Present: Carlene Ferrier, Bert Astles, Ted Laliberté, (Jen Collard called in sick, Sheryl Powers on vacation), Lori Lenart, Cyndi Paulin

The meeting began with a summary of what the team discussed at the June 17 meeting at the KA Brett School in Tamworth and proceeded to go through the list of tasks and determine how they would be accomplished.

1. Tour along bus route with emphasis on medical and mental health facilities: Ted said he was unsure of the date by which the Carroll County Transit buses will be on the road as the request for the buses was put in late and there is an overload on the system because of the ARRA program. The group agreed that this task was important enough not only for the CCTA but also the people who need the services and providers that we should continue to plan for it. If CCTA buses aren't available yet, we could get vehicles some other way. Northern Human Services has vans and staff to drive them, and Ted said Tri-County CAP has extra vehicles at any given time. Other organizations, like The Community School and Ossipee Concerned Citizens, also have vehicles they might make available.
  - a. Ted said it takes 6 hours to do all 3 routes (1.5 hours to get to and from Wolfeboro)
  - b. The CCTA maps do not specifically have all the healthcare facilities on them but include the hospitals. There are DOT regulations about how much can be listed on a schedule. The 6 fixed stops are listed on the schedule. There might be other alternative ways to list all the healthcare facilities (separate map, 2 different colors for fixed and flex routes, etc.). **Ted said he would help in putting together the maps.**
  - c. The facilities of interest include the hospitals, the clinics, the mental health centers, VA centers, and the substance abuse/ATOD facilities.
  - d. **Staff will begin to put this list together, and team members will add to it.** The list should include co-located programs (i.e. VA center, walk-in clinic, acupuncturist all located at Saco River Medical Group).
  - e. The group needs to reach out to providers to invite them on the tour and make sure they are sharing bus information with their clients (Ted said he is already working on the second half of this). Which providers should be invited?
2. If the group succeeds in getting more people to healthcare facilities, will those facilities be able to handle the increased load?
  - a. Bert said Northern could, although it might result in a short wait-list to see psychiatrists (not clinicians).
3. Rate of un- and underinsured
  - a. We have the Robert Wood Johnson report, but it's 2005 data.
  - b. **Carlene will look at the NH Health WRQS data and find out how old it is.**
  - c. All states now have the option of participating in an expanded Medicaid system, which would cover more people (by eliminating the disability requirements?), but history suggests that NH won't do that until they have to in 2014.
  - d. Community needs assessment might give an estimate of the number of un- and underinsured. **Carlene will check to see if she can get the Huggins data and help Jen in reaching out once the Memorial data is available.**
4. Area marketing resources (school programs, companies, community college programs?)
  - a. No one stepped up to help start that list.

5. Determine community awareness of healthcare resources in the community (#3c on the A3) (Mike Cauble had said he would help with that) – not sure about that step as none of the people at the meeting in July were there for the June meeting.
6. National healthcare scene
  - a. Who are those who are focused on that already? We don't want to re-invent the wheel. Bob Bridgham said he would work on that one; **staff will reach out to him to see what he had in mind when he signed up for it.**
  - b. Other organizations that might have information include the NH Public Health Assoc (**Carlene will contact**), Office of Rural Health (**Cyndi will make contact**), and the North Country Health Consortium (Cyndi will reach out to them, as well).
  - c. Is there a department or office at UNH or Dartmouth that would be following the national scene and sending out reports on it?
7. Benefits offered by employers – do we need or can we aggregate?
  - a. Have by sector by FT/PT statewide – very poignant information; can we add a column that shows percentages in Carroll County? may be able to get by county (Cyndi will check)
  - b. According to the chart, there are only a few very large employers in the county for which we already have data. Do we need it from other companies, too?
  - c. **Bert said he can ask the HR director at Northern to see if they have to report it to anyone in particular**
8. % utilizing local facilities – do we still need? Usage by employees with health insurance or overall?
  - a. Can get the distinct number of clients by town from Northern Human Services (and probably other nonprofits that request money from the towns).
  - b. Should we focus on the usage of the 5 largest facilities in the county? The community needs assessment might have this information. Or should we focus on the facilities that have the capacity to take more people?

#### **Other issues that haven't come up yet**

Bert said he has noticed in the notes that the state hospital bed shortage did not come up in any of the conversations in June, but it has the potential to greatly impact the local facilities. Some patients have had to stay either at Huggins or Memorial for 24+ hours before a bed was available in Concord (where the number of beds was reduced from 224 to 162). Bert will be attending a meeting called by Dave Tower of Huggins Hospital with local law enforcement and the county attorney about this very issue. Cyndi asked the group if they want to address this issue as part of their work, and the group said...Bert said that a group in Allegheny Co., Pennsylvania addressed this issue by putting together a grant-funded program called RESPONSE (?), a mobile crisis unit that would be dispatched to peoples' homes in times of emergency so the hospitals would not get overburdened. The program apparently is working well there.

**The next meeting will be Tuesday, Aug. 10 from 3:30 to 5 p.m. at the Tri-County CAP Resource Center in Tamworth. Other fall meetings will be on Tuesday, September 14<sup>th</sup> and Tuesday, October 12<sup>th</sup>.**