

Charting Carroll County's Course to 2025

Community Health Improvement Plan

2021-2025



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*Cover Photo from Boulder Loop Trail in Conway, NH by Caleb Gilbert, 2020

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Executive Summary

The Staff of Carroll County Coalition Public Health (C3PH), along with the Executive Committee of the Carroll County Public Health Advisory Council are proud to present the second version of the Carroll County Community Health Improvement Plan (CHIP), entitled: "Charting Carroll County's Course to 2025." As the second ever CHIP for Carroll County, it was important for us to review where we have been over the past five years and try to chart a course that will make Carroll County stronger, more resilient, and, ultimately healthier by 2025.

The Last version of the CHIP, the first ever for Carroll County, "Carroll County Promise 2020" (Carroll County Community Health Improvement Plan: 2016 – 2020) addressed the most pressing health priorities for Carroll County at that time, building a foundation for this current version of the CHIP to be built upon. The collective community efforts to address the priorities in the last version of the CHIP puts the county in a place where we can continue to build a better future for the people of Carroll County. By further expanding our partnerships across the county, we can continue to make progress on our most pressing community health needs. Below are the six Health Priorities that were identified in "Carroll County Promise 2020":

- Early Childhood and Early Parenting Support
- Access to Comprehensive Behavioral Health Services
- Substance Misuse and Addiction
- Chronic Disease
- Aging with Connection and Purpose
- Emergency Preparedness Across the Lifespan

Thanks to the committed effort of our partners in Carroll County, we have made significant progress in each and every Health Priority identified in the last version of the CHIP. Public Health is, however, a constantly evolving field, dealing with the context and conditions in which people live. As we chart the next course for the Public Health of Carroll County, many of the priorities remain similar, just with different goals and objectives.

While five years is certainly a significant period of time, these health priorities are deeply rooted in the communities we serve and will continue to need attention. We will continue to give these priorities attention while also celebrating the progress we have made.

As a note of significant concern: this current CHIP is being written in midst of the COVID-19 Pandemic, which has affected the health and wellbeing of the entire world. It is important to consider this context, as our collective response to the Pandemic has produced opportunities and barriers that will affect the health priorities identified in this current CHIP, now and well into the future. The context of Public Health has likely changed forever, and it will be paramount for us to adapt in ways that serve the people of Carroll County throughout 2025 and beyond.

Charting Carroll County's Course to 2025

Through thorough review of existing community health needs assessment and through the support, assistance, and oversight of Carroll County's Executive Committee of the Public Health Advisory Council, this current version of the CHIP was scrutinously reviewed. A special thanks to both Huggins Hospital in Wolfeboro and Memorial Hospital in Conway for involving C3PH in their respective Community Health Needs Assessments. Findings in both were incorporated in this version of the CHIP, to ensure that we captured the most important Health Priorities and that we are aligning efforts to address these priorities. The Health Priorities identified in this current version of the Carroll County Community Health Improvement Plan, 2021 – 2025: Charting Carroll County's Course to 2025 are as follows:

- **Access to Comprehensive Physical Health Services**
- **Access to Comprehensive Behavioral Health Services**
- **Healthy Aging**
- **Healthy and Thriving Early Childhood Experiences**
- **Public Health Emergency Preparedness Across the Lifespan**



Figure 1: Carroll County Seal

A Final Note: Changing the Carroll County Narrative – From Pessimism to Promise

This was a theme that ran through the entirety of the original Carroll County CHIP and we believe it is something that we are still making progress toward. According to the 2020 County Health Rankings, Carroll County rated number 4 for Health Factors, yet we ranked number 7 for Health Outcomes. ¹By working to eliminate the gap between these two measures, we can make Carroll County one of the healthiest in the state of New Hampshire and turn historic pessimism to future promise. This current version of the CHIP charts this course to a more promising future.

¹ <https://www.countyhealthrankings.org/app/new-hampshire/2020/overview>

Introduction

Overview

Carroll County Coalition for Public Health is an initiative of Granite United Way and we are funded by New Hampshire Department of Health and Human Services, Division of Public Health Services to be the Regional Public Health Network for all of Carroll County. We are one of thirteen Regional Public Health Networks located throughout the State. Our work focuses on the health of the population and communities that make up the County. We work with all sectors that are invested in the health and wellbeing of the people of Carroll County. As the Regional Public Health Network for Carroll County, we are tasked with constructing and monitoring a Community Health Improvement Plan every five years.

Carroll County is a geographically large county that sits along the eastern border of New Hampshire and western border of Maine. With Lake Winnepesaukee to the south and the White Mountain National Forest to the north, Carroll County is a destination for visitors all along the east coast of the United States and beyond. The natural environment of this 931 square mile county² offers ample opportunity for outdoor recreation and a serene natural environment. In fact, it is often one of the top reasons that people choose to live in this County.

A sparsely populated county with no urban hub or true city, economic opportunities center around ecotourism, outdoor adventure, resorts, retail shopping, restaurants, lodging, and forest products. In fact, Conway, the municipality with the largest population in the County, was voted number 1 ski town in the USA Today's "10 Best" of 2020.³ All of these factors make Carroll County a destination that many people from around the USA and the world want to visit. This, in turn, necessitates an economy that serves this highly transient and visitor population.

Based on the ESRI Classification Index, Carroll County qualifies as "Rural Resort Dweller."⁴ While the County's economy is deeply rooted in tourism, it is home to nearly 50,000 full-time residents. For those who live in this County, the very landscape that makes it such a destination, does provide some challenges. The natural geography of the County leads to fragmented service centers, difficult commutes, and housing challenges. Regional coordination among county service providers is key to promoting the health and wellbeing of the people of the County. Furthermore, school districts and hospital catchment areas do their best to assimilate with our rugged geography, but this poses some challenges in accessing important services throughout the County.

As we move into the future and chart our course to 2025, we must examine tools that can help us cope with the challenges of living in a mostly very rural and sparsely populated County. The COVID-19 Pandemic has thrust us into the realm of telehealth and remote access to work and school. Over the next five years, we will have to work to strike a balance between technological advancements and the need for in-person communication.

² <https://www.census.gov/quickfacts/carrollcountynewhampshire>

³ <https://www.10best.com/awards/travel/best-ski-town-2020/>

⁴ 2019 Huggins Hospital Community Health Needs Assessment: <https://www.hugginshospital.org/assets/>

Community Profile



The overall population of Carroll County has hovered around 50,000 since the last iteration of the U.S. Census, conducted in 2010 (the 2020 Census is currently ongoing as this current CHIP is being constructed). A sparsely populated county, the population per square mile is 51.⁵ With a median age of 52 and 29% of the population over age 65, we are the oldest County in the state of New Hampshire.⁶ While a population skewing older with each passing year proposes certain challenges, it also presents great opportunity.

While shifts in the age of the population continue to skew older, Carroll County is also home to families with children. About 15% of the County's population is under 18 years of age.⁷ This necessitates a focus on services that address the needs of families and children too. Carroll County's childhood poverty rate is 13% and 6% of young people under the age of 18 do not have health insurance.⁸

The median household income in Carroll County is \$61,116, but there are pockets of disparity located throughout the county. For example, the median income of single-father headed households is \$39,605 and the median income of single-mother headed households is \$27,250.⁹ This disparity in income levels throughout the County paint very different pictures of how families are doing, from household to household. Limited housing stock and extremely low vacancy rates are also putting upward pressure on housing costs, further highlighting this income disparity in the Country.

A mostly homogenous County, ethnically and racially speaking, it can often seem like we lack a diverse culture within Carroll County. However, there are people of nonwhite backgrounds who live throughout the County. Carroll County also is a destination for international J1 Exchange Visitor Visa Holders who come to the county to work for extended periods of time. Carroll County is also home to significant numbers of same-sex marriage households and LGBTQ individuals. Services that address that specific needs of all people that live and work in Carroll County, along with those that visit our County must be considered. See Figure 2: Carroll County Demographics for a more detailed summary of the County's Demographic breakdown.

⁵ U.S. Census, 2010: <https://www.census.gov/quickfacts/carrollcountynewhampshire>

⁶ <https://www.census.gov/quickfacts/carrollcountynewhampshire>

⁷ <https://www.census.gov/quickfacts/carrollcountynewhampshire>

⁸ Carroll County Data, Kids Count 2019

⁹ Carroll County Data, Kids Count 2019

	Carroll County	New Hampshire	USA
Population	50,063	1,386,718	332,417,793
Median Age	52.0	43.1	38.5
Median Household Income	\$57,598	\$73,444	\$60,548
Annual Pop. Growth (2019-2024)	0.31%	0.55%	0.77%
Household Population	22,271	549,701	129,922,162
Dominant Tapestry	Rural Resort Dweller (6E)	The Great Outdoors (6C)	Green Acres (6A)
Businesses	2,939	65,557	12,112,147
Employees	28,226	763,132	150,271,675
Medical Care Index*	105	113	100
Average Medical Expenditures	\$2,098	\$2,258	\$2,005
Total Medical Expenditures	\$46.7 M	\$1.2 B	\$251.0 B
Racial and Ethnic Make-up			
White	97%	92%	68%
Black	1%	2%	13%
American Indian	0%	0%	1%
Asian/Pacific Islander	1%	3%	7%
Other	0%	1%	7%
Mixed Race	1%	2%	4%
Hispanic Origin	2%	4%	19%

Figure 2: Carroll County Demographics¹⁰

¹⁰ 2019 Huggins Hospital Community Health Needs Assessment: <https://www.hugginshospital.org/assets/pdf/webCHNAandImplementation2019.pdf>

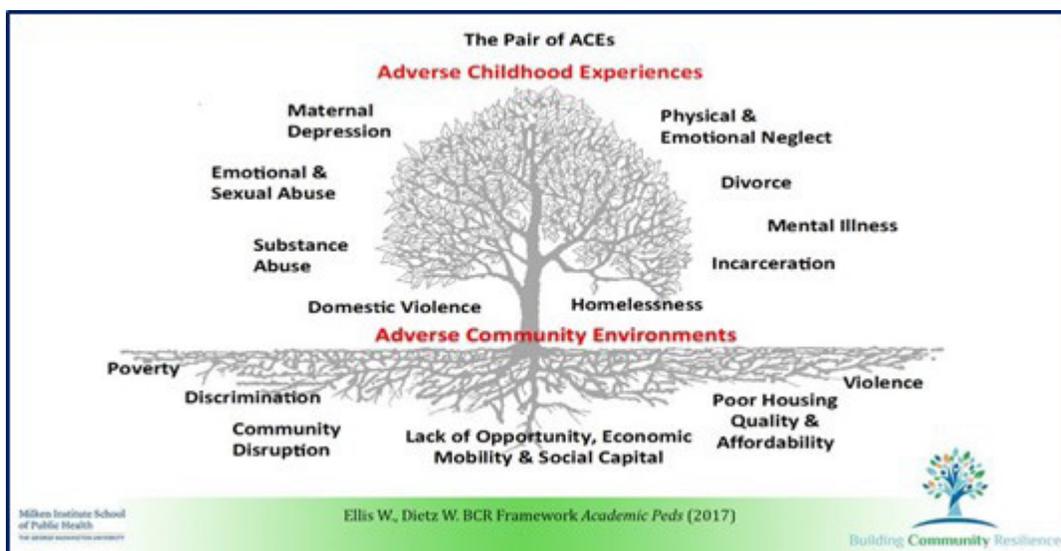
Social Determinants of Health (SDOH)

Background

Understanding of Social Determinants of Health has increased exponentially in recent years. Both Memorial Hospital and Huggins Hospital named Social Determinants of Health as priorities in their 2019 Community Health Needs Assessments (CHNA). Social Determinants of Health (SDOH) are defined by the United States Centers for Disease Control and Prevention as the “conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes.”¹ Healthy People 2030 outlines the following five key areas of SDOH:

1. Healthcare Access and Quality
2. Education Access and Quality
3. Social and Community Context
4. Economic Stability
5. Neighborhood and Built Environment

Another way to examine the impacts of SDOH was offered by researchers Wendy Ellis and William Dietz (2017; see figure 1: The Pair of ACEs). The impact of Adverse Childhood Experiences is discussed under the “Thriving and Healthy Experiences During Early Childhood” Priority of this CHIP, but The Pair of ACEs documents how the conditions of the communities where people live affect their wellbeing. Using a tree as a metaphor, if we do not tend the soil – or the conditions in which the tree grows – we cannot expect to have healthy trees. Addressing SDOH does just that: it increases efforts to improve the conditions of the community, which have an overwhelming impact on the physical and mental health of the individuals and families who live in the community.



¹US CDC: <https://www.cdc.gov/socialdeterminants/about.html>

Social Determinants of Health & The Carroll County Health Improvement Plan

Given the profound impact that SDOH has on the health and wellbeing of people, it is important to recognize the role these determinants play in the Carroll County 2021-2025 Community Health Improvement Plan. SDOH plays a significant role in all priorities of the CHIP and is a common thread that connects the health outcomes of the people of Carroll County. Factors that influence SDOH in Carroll County impact each of the five priorities identified in the 2021-2025 CHIP and must be considered in what we do to address each of the five CHIP priorities.

Issues related to housing and transportation have been pervasive throughout the duration of the last CHIP. These two issues will likely present challenges throughout the duration of this current CHIP as well. Housing is fundamental to one's wellbeing and sense of place, yet we see housing options becoming more limited and expensive. According to a recent report published by the Mount Washington Valley Housing Coalition: "The local housing market has failed to provide a range of units that are affordable to workers who are employed in the industries that comprise the great majority of MWV's economic base."² Given the geography of the County, transportation is key to one's wellbeing as well. Privately owned vehicles are far and away the most common means of transportation in the County and lack of access to such means does have an impact on people's ability to access care and services.

As the COVID-19 Pandemic rapidly necessitated the need for remote technological access and telehealth, we will need to continue to develop and enhance these important tools as a potential to help alleviate some issues related to transportation. Broadband and technology access and its role in education, health, and social connection are now more important than ever. These were critical aspects of SDOH before the COVID-19 Pandemic and are even more so now. These components of SDOH will remain forefront as we chart the course for the future of Carroll County.

Memorial Hospital's 2019 Community Health Needs Assessment identified key data points in Carroll County Related to SDOH. Qualitative points highlighted in the Memorial Hospital 2019 CHNA related to SDOH included: housing, transportation, and food insecurity.³ Quantitative data points related to SDOH included:

- The percentage of children living in poverty increased between 2008-2012 and 2012-2016, from 12.7% to 13.1%. The percentage was higher than NH overall (11.0%).
- The percentage of individuals living in poverty (10.1%) was higher than NH overall (8.5%) in 2012-2016.

In order to make progress on the Community Health Priorities identified in this CHIP, we will need to consider the role that SDOH plays in the wellbeing of the people of Carroll County. Financial, housing, transportation, nutritional, educational, and occupational resources affect each and every priority area addressed in this CHIP. SDOH will be foundational to every Community Health initiative that we will collectively pursue as a County.

²Housing Matters in Mt. Washington Valley, 2012: <http://www.mwvhc.org/uploads/5/6/4/6/56460893/housing-matters--in-mwv-reduced.pdf>

³Memorial Hospital Community Health Needs Assessment, 2019: <https://www.mainehealth.org/-/media/Community-Health/CHNA/2019-CHNA-Report-Carroll-County-Web.pdf>

Access to Comprehensive Physical Health Services

Background

How and where people access care for their physical health is integral to their wellbeing. There are many factors that play a role in how and where people access physical health services. The geographical landscape of Carroll County plays a prominent role in how people access care. Many issues covered in the "Social Determinants of Health" section of this current CHIP are highlighted under this priority. Housing, transportation, and financial resources all play a role in how the people of Carroll County access physical health services. Being that many of our services are dispersed throughout a large and sparsely populated County, accessing physical health services is a priority under this current CHIP.

Both Huggins Hospital and Memorial Hospital deemed access to care a significant need in their respective 2019 Community Health Needs Assessments.¹ ²Efforts to coordinate access to physical health services have been underway in the County for a number of years, especially since key County providers began participation in the Integrated Delivery Network Region 7. Collective efforts to coordinate access to care and integrate behavioral and physical health has yielded some great results for the County, yet there remains room for growth. Both County Hospital Community Health Needs Assessments specifically point to the role of affordability of healthcare services and peoples' ability to pay as important factors under this priority. Currently, 9% of the County's population does not have health insurance.³ The impacts of uninsured and underinsured people have multifaceted ripple-effects for individuals, families, providers, and overall healthcare costs in Carroll County. This necessitates a focus on financial and health insurance resources under this current CHIP.

The COVID-19 Pandemic has transformed the delivery of physical healthcare services in Carroll County and beyond. Rapid advances in telehealth brought on in response to COVID-19 have opened opportunities for people to access healthcare providers remotely. For those able to access remote healthcare services, these new delivery models may alleviate some issues related to transportation. This does, however, highlight the need for the County to collectively consider access to technological devices and broadband internet. Many of these changes to the delivery of healthcare will remain beyond the pandemic and we will need to consider these elements of accessing healthcare under this CHIP.

One of the most beneficial characteristics of Carroll County, when it comes to the physical wellness of people living in the County, is its natural environment. A paradox has been well documented throughout recent needs assessments in the County: the natural environment offers ample opportunity for outdoor physical activity, yet it also proposes challenges to accessing care and essential services.

¹Mt. Washington Valley 2019 Community Health Needs Assessment Report: <https://www.mainehealth.org/-/media/Community-Health/CHNA/2019-CHNA-Report-Carroll-County-Web.pdf>

²2019 Huggins Hospital Community Health Needs Assessment: <https://www.hugginshospital.org/assets/pdf/webCHNAandImplementation2019.pdf>

³2020 Carroll County Health Rankings: <https://www.countyhealthrankings.org/app/new-hampshire/2020/rankings/carroll/county/outcomes/overall/snapshot>

The gap between health outcomes and health factors was highlighted in the 2020 Carroll County Health Rankings: Carroll County ranks #7 in Health Outcomes versus #4 in Health Factors.⁴ Working to close the gap between our health outcomes and health factors will improve the physical wellbeing of people in Carroll County.

See the tables below for more details on Access to Care and Mortality:

<p>Access to Care (Including Affordability)</p>	<p><i>Leading Causes of Death: Age-Adjusted Death Rates per 100,000</i></p> <table border="1"> <thead> <tr> <th>Cause of Death</th> <th>Carroll County</th> <th>New Hampshire</th> <th>US</th> </tr> </thead> <tbody> <tr> <td>Heart Disease</td> <td>129.3</td> <td>149.7</td> <td>165.0</td> </tr> <tr> <td>Cancer</td> <td>157.9</td> <td>153.5</td> <td>152.5</td> </tr> <tr> <td>Accidents (Unintentional Injuries)</td> <td>77.7</td> <td>62.9</td> <td>49.4</td> </tr> <tr> <td>Respiratory Diseases</td> <td>39.4</td> <td>43.0</td> <td>40.9</td> </tr> <tr> <td>Strokes</td> <td>34.0</td> <td>28.9</td> <td>37.6</td> </tr> <tr> <td>Alzheimer's</td> <td>26.5</td> <td>24.8</td> <td>31.0</td> </tr> <tr> <td>Diabetes</td> <td>14.5</td> <td>19.2</td> <td>21.5</td> </tr> <tr> <td>Influenza and Pneumonia</td> <td>10.2</td> <td>13.1</td> <td>14.3</td> </tr> <tr> <td>Suicide</td> <td>21.7</td> <td>18.9</td> <td>14.0</td> </tr> <tr> <td>Kidney Disease</td> <td>7.3</td> <td>9.4</td> <td>13.0</td> </tr> <tr> <td>Liver Disease</td> <td>11.9</td> <td>9.1</td> <td>10.9</td> </tr> </tbody> </table>	Cause of Death	Carroll County	New Hampshire	US	Heart Disease	129.3	149.7	165.0	Cancer	157.9	153.5	152.5	Accidents (Unintentional Injuries)	77.7	62.9	49.4	Respiratory Diseases	39.4	43.0	40.9	Strokes	34.0	28.9	37.6	Alzheimer's	26.5	24.8	31.0	Diabetes	14.5	19.2	21.5	Influenza and Pneumonia	10.2	13.1	14.3	Suicide	21.7	18.9	14.0	Kidney Disease	7.3	9.4	13.0	Liver Disease	11.9	9.1	10.9
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<p>Strategy to address needs (from Huggins Implementation Plan):</p> <ul style="list-style-type: none"> • Increase specialty and primary care services and access • Increase Care Coordination services at Huggins Hospital • Increase access to Huggins Health Neighborhood to help navigate people through their care journey • Provide education regarding financial stability and its impact to overall wellbeing <p>Anticipated impact:</p> <ul style="list-style-type: none"> • Reduced ED visits • Increase in people served by the Huggins Health Neighborhood • Increase in those accessing preventative care as opposed to acute <p>Resources proposed or needed:</p> <ul style="list-style-type: none"> • RN Care Coordinators • Increase in care providers • Funding for community initiatives • Community Education Campaign <p>Collaborations anticipated:</p> <ul style="list-style-type: none"> • Huggins Community Health Network • Financial Experts and Resources 	<p><i>Table 2: Carroll County Leading Causes of Death</i></p> <p>COMMUNITY RESOURCES TO ADDRESS ACCESS TO CARE</p> <p>Table 3 is a summary of the assets and needs identified through the community engagement process, including review by local teams. It is important to note that this is not a complete list of available resources or existing needs in the community; other resources, like 211 New Hampshire, and local/county resource guides should be referenced as a more comprehensive inventory.</p> <p>Table 3: Assets and Gaps/Needs (Access to Care) in Mt. Washington Valley</p> <table border="1"> <thead> <tr> <th>ASSETS</th> <th>GAPS/NEEDS</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> • Visiting Nurse Home Care & Hospice of Carroll County • New Hampshire Integrated Delivery Network (IDN) Medicaid Waiver • As a rural community, our ability to collaborate and coordinate services because we know each other well • Collaboration between health agencies/disciplines • The Gibson Center • Carroll County Retired Senior Volunteer Program (RSVP) • New Hampshire Tri-County Community Action Program • Memorial Hospital Population Health work </td> <td> <ul style="list-style-type: none"> • More health insurance navigators • Access to specialists • Community health workers • More primary care physicians • Telehealth • Administrative support for medical professionals • Affordable dental care for adults • Better eye care for all • Lack of transportation to appointments both local, and to specialty services in Maine and Boston </td> </tr> </tbody> </table>	ASSETS	GAPS/NEEDS	<ul style="list-style-type: none"> • Visiting Nurse Home Care & Hospice of Carroll County • New Hampshire Integrated Delivery Network (IDN) Medicaid Waiver • As a rural community, our ability to collaborate and coordinate services because we know each other well • Collaboration between health agencies/disciplines • The Gibson Center • Carroll County Retired Senior Volunteer Program (RSVP) • New Hampshire Tri-County Community Action Program • Memorial Hospital Population Health work 	<ul style="list-style-type: none"> • More health insurance navigators • Access to specialists • Community health workers • More primary care physicians • Telehealth • Administrative support for medical professionals • Affordable dental care for adults • Better eye care for all • Lack of transportation to appointments both local, and to specialty services in Maine and Boston 																																												
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<p><i>Table 1: Access to Care: 2019 Huggins CHNA</i></p>	<p><i>Table 3: Access to Care: 2019 Memorial CHNA</i></p>																																																

⁴2020 Carroll County Health Rankings: <https://www.countyhealthrankings.org/app/new-hampshire/2020/overview>

Key partnerships forged over recent years will continue to serve this priority throughout the duration of this current CHIP. The Mt. Washington Valley Community Health Collaborative, born out of IDN Region 7, continues to play an active role in bringing healthcare partners together in northern Carroll County. The recently formed Huggins Community Health Network is working diligently to bring together healthcare, mental health, and social service partners in the southern part of Carroll County. Both these initiatives will play important roles in this priority moving forward, promoting the coordination of healthcare services across the County.

State and Regional Assets

Many organizations across the county are realizing that it is crucial to work together to address the challenges of improving the access to comprehensive physical health services. State and regional partners currently addressing this priority include:

- Memorial Hospital
- Huggins Hospital
- Saco River Medical Group
- White Mountain Community Health Center
- T. Murray Wellness Center
- Tamworth Community Nurse Association
- Visiting Nurse Homecare and Hospice
- Central NH Visiting Nurse Association
- Service Link of Carroll County
- Northern Human Services
- Children Unlimited: Carroll County Family Resource Center
- White Mountain Health Center
- North Country Health Consortium
- Tri-County Community Action Program
- Tamworth Dental Center
- New Futures

Goals, Objectives, and Strategic Approach

Goal: Make access to physical healthcare services more well-coordinated, financially attainable, and expansive in Carroll County.

Objectives:

1. Increase access to care coordination resources throughout Carroll County.
2. Increase access to preventive healthcare services in Carroll County.
3. Increase access to financial resources that help individuals obtain the care they need.

GOAL	Make access to physical healthcare services more well-coordinated, financially attainable, and expansive in Carroll County.
OBJECTIVE 1	Increase access to care coordination resources throughout Carroll County.
STRATEGIC APPROACH	
Participation in the Huggins Community Health Network.	
Participation in the MWV Community Health Collaborative.	
Increase the utilization and accessibility of Community Health Workers.	
OBJECTIVE 2	Increase access to preventive healthcare services in Carroll County.
STRATEGIC APPROACH	
Continue Efforts to Integrate Behavioral and Physical Health services.	
Retain and enhance telehealth access to primary care services.	
Promote Affordable Dental Services for Adults.	
OBJECTIVE 3	Increase access to financial resources that help individuals obtain the care they need.
STRATEGIC APPROACH	
Provide education regarding financial stability and its impact to overall wellbeing.	
Improve utilization of the Earned income Tax Credit in Carroll County.	
Increase Health Insurance Navigator Services.	

Summary

Access to Physical Health remains a priority under this current CHIP. Both Huggins Hospital and Memorial Hospital identified access to care as a priority in their respective 2019 Community Health Needs Assessments. Challenges accessing care exist in our County due its geographical landscape and issues related to transportation. COVID-19 has changed the delivery of healthcare services and we will work to make telehealth services available for those who can benefit from it. Financial resources also play an integral role in accessing healthcare and efforts to increase access to financial resources and health insurance will also play an important role under this priority. Partnerships that center around the coordination of services will continue to be essential to Improve Access to Comprehensive Physical Health Services in Carroll County.

Access to Behavioral Health Services

Background

Access to Comprehensive Behavioral Health Services remains a Community Healthy Priority in this version of the CHIP. In the last version of the CHIP, Substance Misuse Prevention stood alone as its own priority, but given changes in the landscape over the past five years and the efforts to facilitate the delivery of Behavioral Health services across the continuum – Prevention, Intervention, Treatment, and Recovery – we have moved to consolidate these priorities into one. In recent years C3PH has successfully implemented and grown a combined SUD Prevention Leadership and Continuum of Care stakeholder group, “Carroll County Responds to Substance Use Disorder” and this model will continue forward.

In the prior five years since the last version of the CHIP was published, we have seen growth in providers addressing Substance Use Disorder (SUD) and Mental Health in the county as well as community efforts to address stigma. This growth includes the establishment of two Recovery Centers in the County: White Horse Recovery Behavioral Health Services and Mount Washington Valley (MWV) Supports Recovery Coalition. Having these two centers as a part of the county's response to SUD and Mental Health has increased our collective capacity exponentially. There are also more healthcare providers waived to administer medication for addiction treatment together with group counseling across the hospital systems, major primary care practices in the region and at private practices. As we celebrate this growth, we also must anticipate that needs related to SUD and Mental Health across the lifespan will persist throughout the duration of this current CHIP.

Prevention will continue to play an important role in this version of the CHIP as well. Research shows that early use of substances is a risk factor for addiction later in life.¹ Focusing on youth substance misuse prevention in the County remains an integral part of overall community wellness. By engaging community partners and youth in evidence-based Substance Misuse Prevention, we can collectively work to create healthier futures for the young people of Carroll County. In response to advocacy by regional public health partners, all three regional high schools in Carroll County participated in the 2019 Youth Risk Behavior Survey, making aggregate county data reports available. These crucial reports were not available during previous CHIP. Prevention priorities are informed by this data and will focus on building community protective factors, reducing risk factors and increasing community education regarding alcohol, prescription misuse and other substance misuse. These efforts also include the use of tobacco and electronic nicotine delivery systems, otherwise known as vaping products. Community awareness activities about the impact of adverse childhood experiences will also be included. See Table 1: Carroll County HS YRBS, Past 30-Day Use for more information on substance use among high schoolers in the County.

¹ National Institute on Drug Abuse, 2011: <https://www.drugabuse.gov/publications/preventing-drug-use-among-children-adolescents/chapter-1-risk-factors-protective-factors/when-how-does-drug-abuse-start-progress>

2019 Carroll County Youth Risk Behavior Survey High School Past 30-Day Use	
Electronic Vapor Product	41%
Marijuana	33%
Alcohol	32%

Table 1: Carroll County HS YRBS, Past 30-Day Use²

The consequences of substance misuse remain prevalent in the County. In 2018 Carroll County saw 13 overdose deaths.³ In 2019 there were 11, with the greatest incidence happening in the communities of southern Carroll County. The county saw an overall decrease in overdose deaths per 10,000 population of 2.26 in 2019, down from 2.67 in 2018.⁴ EMS Narcan administration per 10,000 population in the county increased from 12.75 in 2018 to 13.98 in 2019. The rate of overdose emergency medical service responses in the County, including overdoses from drugs/ medication, alcohol, and inhalants, more than doubled between 2013-2014 and 2016-2017.⁵ Emergency department opioid use related visits per 10,000 population saw an increase from 22.63 in 2018 to 24.27 in 2019.⁶ In response to an increased demand in emergency medical services and regional hospital Emergency Departments, County Recovery Centers have partnered with Huggins and Memorial Hospital to provide peer recovery supports in the Emergency Rooms. Hospitals have also flexed to grant behavioral health care providers within their system access to patients in emergency department, creating increased opportunities for integrated primary and behavioral healthcare. These types of initiatives will be key to enhance further progress moving forward.

The intersection of substance use and mental health is well documented. Ensuring coordinated access to mental health services, in addition to SUD services, is an integral part of this priority. Coordinating the efforts of community Mental Health partners and working to integrate these services with SUD services and Primary Care services will help to improve the overall health and wellbeing of the people of Carroll County. Mental health services have increased within primary care practices, recovery centers and in public school systems – through partnerships with the County's Family Resource Center. While gains have been made, the workforce development needs for behavioral health services continue to face significant challenges to meet local demand, especially in the context of the regional response and recovery from the COVID-19 pandemic. Since the publication of the last CHIP, the NH State 10 Year Mental Health Plan was approved and serves to inform a vision for a regional mental health system that provides access to a full continuum of care: prevention and early intervention services⁷; outpatient, inpatient and community supports; child-focused strategies; further integration of primary care and mental health care; and a robust plan for suicide prevention.

² 2019 Carroll County High School Youth Risk Behavior Survey: <https://www.dhhs.nh.gov/dphs/hsdm/documents/carroll-yrbs-results-2019.pdf>

³ NH Health Wisdom, 2018: <https://tinymce.nhwis.net/plugins/moxiemanager/data/files/docs/MedicalExaminerReports/ME2018Final.pdf>

⁴ NH Drug Monitoring Initiative, 2019 Overview Report

⁵ Mt. Washington Valley 2019 Community Health Needs Assessment Report: <https://www.mainehealth.org/-/media/Community-Health/CHNA/2019-CHNA-Report-Carroll-County-Web.pdf>

⁶ NH Drug Monitoring Initiative, 2019 Overview Report

According to the National Institute of Mental Health, in the U.S. in 2019, of the 51.5 million adults aged 18 or older with any mental illness (AMI), (defined as receiving mental health services, inpatient treatment/counseling or outpatient treatment/counseling, or having used prescription medication for problems with emotions, nerves, or mental health) just 23.0 million (44.8%) received mental health services in the past year. More women with AMI (49.7%) received mental health services than men with AMI (36.8%). The percentage of young adults aged 18-25 years with AMI who received mental health services (38.9%) was lower than adults with AMI aged 26-49 years (45.4%) and aged 50 and older (47.2%).

While suicide prevention has been a regional priority, in this latest Community Health Improvement Plan, Carroll County's public health network will have increased capacity to lead a regional response and prevention effort. A youth suicide prevention initiative is forming in Carroll County, NH. With federal funds from the Garrett Lee Smith Grant, the NH Nexus Project 2.0 (GLS NHNP 2.0) will bring together a Carroll County Implementation Team to work over five years, from 2020-2025, to build a cross-systems, collaborative approach to reduce suicide incidents among youth. This initiative will focus on improving pathways to care and offering training to provide youth serving organizations with the resources to identify, screen, refer and treat at-risk youth. Carroll County Coalition for Public Health/Granite United Way, Northern Human Services and White Mountains Community College, with the support of regional Carroll County community agency partners, will collaborate with NAMI NH to move this work forward.⁸

2019 Carroll County Youth Risk Behavior Survey	
High School Students who have ever seriously considered suicide	20.5%

⁷ NH State 10 Year Mental Health Plan: <https://www.dhhs.nh.gov/dcbcs/bbh/documents/10-year-mh-plan.pdf>

⁸ <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

State and Regional Assets

The following is a sampling of the organizations actively involved in mental health/ behavioral health promotion, suicide prevention, and substance use disorder prevention, intervention, treatment, and recovery support efforts in Carroll County:

<ul style="list-style-type: none"> • Bartlett Police Department • Better Life Partners • Carroll County Adult Education • Carroll County Association of Chiefs of Police • Carroll County Department of Corrections • Carroll County Drug Court • Carroll County Sheriff's Department • Carroll County Visiting Nurses, Homecare & Hospice • Central NH Visiting Nurses Association & Hospice • Children Unlimited • Conway Daily Sun • Conway Police Department • Doorway NH Centers, Laconia, Dover, Berlin, Littleton • Families In Transition, Hope House • First Christian Church of Wolfeboro • First Congregational Church of Ossipee • Governor Wentworth Regional School District, SAU 49 • Granite Recovery Centers • Groups Recover Together 	<ul style="list-style-type: none"> • Huggins Hospital • Jackson Police Department • Kingswood Youth Center • Madison Police Department • Memorial Hospital • Moultonborough Police Department • Moultonborough School District, SAU 45 • Mount Washington Valley Supports Recovery • Mt Washington Valley Chamber of Commerce • MWV Housing Coalition • MWV NH Smart Recovery • Nativity Lutheran Church • New Futures • NH DOE Bureau of Student Wellness • NHEP Workplace Success • North Country Cares • North Country Health Consortium • Northern Human Services • Office of Senator Jeanne Shaheen • Office of Senator Maggie Hassan • Office of Congressman Chris Pappas 	<ul style="list-style-type: none"> • Open Door Bible Church • Ossipee Police Department • Road to a Better Life • Saco River Medical Group • Salmon Press (Granite State News and Carroll County Independent) • Sandwich Police Department • SAU 101, Wakefield • SAU 9, Conway area • Starting Point Services, Domestic & Sexual Violence • Tamworth Police Department • Tri-County Community Action Program • Tuftonboro Police Department • Wakefield Police Department • White Mountain Community Health Center • White Mountain Restorative Justice Program • Whitehorse Recovery Behavioral Health • Wolfeboro Police Department
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Goals, Objectives, and Strategic Approach

Goal: Increase access to comprehensive prevention, intervention, treatment, and recovery services for behavioral health across Carroll County, NH.

Objectives:

1. Promote regional efforts to expand access to telehealth and other remote services.
2. Facilitate cross-sector communication and collaboration between community service providers to support prevention intervention, treatment and recovery service delivery for Substance Use Disorder, Harm Reduction and Mental Health.
3. Increase community and workplace training options to decrease stigma and improve awareness, education and resource referral related to Substance Use Disorders.
4. Expand Youth Suicide Prevention training, intervention and postvention response resources in Carroll County.
5. Establish youth engagement activities within regional Substance Misuse and Suicide Prevention initiatives.
6. Promote community education and prevention activities related to tobacco and nicotine use prevention and cessation.

GOAL	Increase access to comprehensive prevention, intervention, treatment, and recovery services for behavioral health across Carroll County, NH.
OBJECTIVE 1	Promote regional efforts to expand access to telehealth and other remote services.
STRATEGIC APPROACH	
Promote efforts to retain and enhance telehealth access in the County.	
Identify barriers to accessing telehealth services in the County.	
Promote provider participation in The NH Citizens Health Initiative's Pediatric Improvement Partnership (NH PIP).	
Promote provider participation in NH Citizens Health Initiative's and the UNH Department of Nursing Project ECHO learning community around Medications for Addiction Treatment (MAT).	

<p>Promote provider participation in NH Citizen's Health Initiative's ECHO series of ten sessions aims to increase early intervention provider's knowledge of strategies, skills, and resources for supporting the complex needs of children with Neonatal Abstinence Syndrome and their families.</p>	
<p>OBJECTIVE 2</p>	<p>Facilitate cross-sector communication and collaboration between community service providers to support prevention intervention, treatment and recovery service delivery for Substance Use Disorder, Harm Reduction and Mental Health.</p>
<p>STRATEGIC APPROACH</p>	
<p>Continue to convene Carroll County Responds to SUD Leadership and Stakeholder Team.</p>	
<p>Increase participation in Carroll County Responds to SUD Leadership Team.</p>	
<p>Regional Public Health Network staff will actively participate and offer technical assistance in various Carroll County based networks and collaboratives where resources and communications are shared between educators, healthcare, mental health/ behavioral health, harm reduction services, business, service providers, government and concerned citizens.</p>	
<p>OBJECTIVE 3</p>	<p>Increase community and workplace training options to decrease stigma and improve awareness, education and resource referral related to Substance Use Disorders.</p>
<p>STRATEGIC APPROACH</p>	
<p>Collaborate with Recovery Friendly Workplace program to expand program reach in Carroll County, NH.</p>	
<p>Increase public health related training and education opportunities for employers and employees in the County.</p>	

OBJECTIVE 4	Expand Youth Suicide Prevention training, intervention and postvention response resources in Carroll County.
STRATEGIC APPROACH	
Continue to convene Carroll County Youth Suicide Prevention Implementation Team.	
Increase suicide prevention training opportunities to all community sectors.	
Work with Care Liaison to integrate intervention and postvention resources in the County.	
OBJECTIVE 5	Establish youth engagement activities within regional Substance Misuse and Suicide Prevention initiatives.
STRATEGIC APPROACH	
Work with youth leadership groups in the County to expand youth engagement in health promotion, substance misuse prevention and suicide prevention.	
Share out evidence based social media messaging to promote public health priorities related to youth, adolescent and young adult health.	
OBJECTIVE 6	Promote community education and prevention activities related to tobacco and nicotine use prevention and cessation.
STRATEGIC APPROACH	
Increase education related to tobacco, nicotine products including electronic nicotine delivery systems/vaping products	
Expand access to resources for schools, youth, and young-adult-serving organizations related to tobacco, nicotine products, including electronic nicotine delivery systems/vaping products.	
Promote statewide and regional resources for tobacco cessation such as QuitNowNH.org .	

Summary

Carroll County Responds to SUD (Substance Use Disorder), the workgroup which focuses on the priority of Substance Misuse and Addiction in Carroll County is led by the Substance Misuse Prevention Coordinator and the Continuum of Care Facilitator. It works to promote communication and collaboration among regional service providers and stakeholders; to promote increased awareness of and access to substance use disorder and related services in the county; and to build the capacity of our public health network partners to provide evidence-based prevention, intervention, treatment and recovery support services through training and technical assistance. Carroll County Responds to SUD acts to increase general public awareness of the extent of the substance misuse problem and shares information about strategies to reduce the problem and resources to support individuals and families grappling with substance use disorders, through local media, and social media promotion of the statewide campaigns such as The Doorway NH, Binge-Free 603, My Life My Quit, National Suicide Prevention Lifeline and others. This group will maintain its leadership role and work destigmatize mental health and substance use disorder treatment and recovery support throughout the duration of this current CHIP.

Healthy Aging

Background

Healthy Aging, specifically “Aging with Connection and Purpose” was a priority in the prior Carroll County Community Health Improvement Plan. While significant progress and partnerships developed over the past five years since the initial Carroll County CHIP, this topic area remains a priority in this current version of the CHIP. The demographics of Carroll County necessitate the inclusion of Healthy Aging as a health priority, as not only does the County remain the oldest county in the state by measure of median age, the demographics have been skewing older over time. Not only is Carroll the oldest County in the state, with a median age of 51.7,¹ we are also growing older every year. (see Figure 1: Carroll County Histogram).

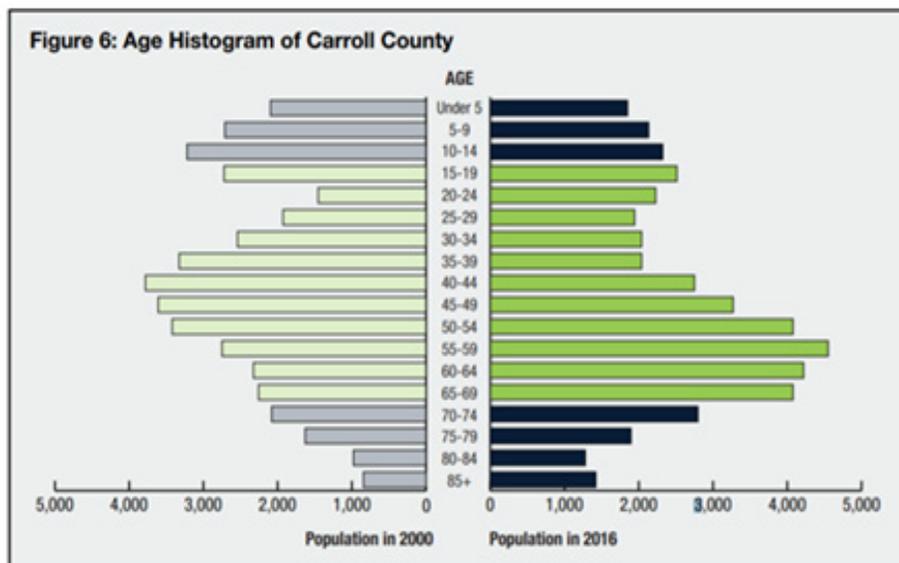


Figure 1: Histogram of Carroll County²

While services that specifically cater to the unique needs of older adults are crucial to allow older adults to age well in the communities they live in, resources and services that also focus on the overall quality of life for all people are important as well. The World Health Organization’s definition of active aging and support services are those that “optimize opportunities for health, participation and security in order to enhance quality of life as people age.”³ Services for older adults should exist in a connected continuum of services that benefit all people. In recent years we have seen the creation of an AARP Age-Friendly Community in the northern part of the County, known as Mt. Washington Valley (MWV). The MWV Age-Friendly Community serves ten towns in northern Carroll County and has worked diligently to reframe what it means to be an “age friendly” community.

¹ U.S. Census Bureau, 2018

² MT. WASHINGTON VALLEY 2019 Community Health Needs Assessment Report: <https://www.mainehealth.org/-/media/Community-Health/CHNA/2019-CHNA-Report-Carroll-County-Web.pdf>

³ World Health Organization, Ageing: https://www.who.int/health-topics/ageing#tab=tab_1/

This initiative has helped us recognize, through the World Health Organization's Age-Friendly Communities Framework, that age friendly communities are beneficial to all people. C3PH has partnered with this initiative and will work with them to chart a course for our County in the coming years.



While we collectively try to integrate services for older adults into all aspects of our community, there still is a need to focus on services that address the unique needs of aging adults in the County. Through recent Community Health Needs Assessments, both County Hospitals – Memorial Hospital and Huggins Hospital – have also identified healthy aging as a priority. As we consider the issues facing the aging population in our County and their impact on overall health of the County, we found it necessary to include Healthy Aging as a priority in this current version of the CHIP. New partnerships and ways of viewing the needs of aging people as a part of the overall Public Health landscape will help us continue to make progress under this important priority.

State and Regional Assets

The following is a list of the organizations actively involved with issues affecting our aging populations in Carroll County:

- Tri-County Community Action Program
- Memorial Hospital/Merriman House
- Huggins Hospital
- White Mountain Community Health Center
- Tamworth Community Nurse Association
- Visiting Nurse Homecare and Hospice
- Central NH Visiting Nurse Association
- ServiceLink of Carroll County
- Northern Human Services
- Wolfeboro Senior Center
- Gibson Senior Services
- Mountainview Nursing Home
- MWV Housing Coalition
- MWV Age-Friendly Community
- Ossipee Concerned Citizens
- Ossipee United Roundtable
- MWV Adult Day Center

Goals, Objectives, and Strategic Approach

Goal: Make Carroll County a place where people can age well in the communities where they live.

Objectives:

1. Increase resources and educational opportunities to make Carroll County communities dementia friendly communities.
2. Increase coordination of services for older adults with chronic conditions.
3. Work with Carroll County communities to make them more liveable for older adults and all people.
4. Enhance the coordination and increase the utilization of Advanced Care Directives.

GOAL	Make Carroll County a place where people can age well in the communities where they live.
OBJECTIVE 1	Increase resources and educational opportunities to make Carroll County communities dementia friendly communities.
STRATEGIC APPROACH	
Partner with the MWV Adult Day Center on Dementia Friendly Communities Project.	
Promote best practices to develop Dementia Friendly communities.	
Provide community and provider education on Dementia Friendly practices.	

OBJECTIVE 2	Increase coordination of services for older adults with chronic conditions.
STRATEGIC APPROACH	
Improve access to primary care and specialist via telehealth.	
Promote services offered by Servicelink of Carroll County.	
Increase care coordination resources for older adults with chronic conditions.	
Promote homecare services offered in the County.	
OBJECTIVE 3	Work with Carroll County communities to make them more liveable for older adults and all people.
STRATEGIC APPROACH	
Promote the principles of AARP Liveable Communities.	
Engage more municipalities to become AARP Age-Friendly Communities.	
OBJECTIVE 4	Enhance the coordination and increase the utilization of Advanced Care Directives.
STRATEGIC APPROACH	
Provide community education on advance planning and advance care directives.	
Increase cross-provider coordination of advance care directives.	
Promote advance care planning in multiple community sectors.	

Summary

Given the demographic shifts since the last CHIP, we can anticipate that this trend will continue throughout the duration of this current CHIP. Therefore, it is crucial that we prioritize services, resources, and initiatives that serve the aging population. We will also continue to engage the aging population in meaningful ways throughout the County. As we balance the need to serve older adults with efforts to support families and attract younger people in the County, we can seek to make our communities places that are good for all people. Continuing to build on partnerships developed through the last version of the CHIP, we will work together to make Carroll County a place where people can age well in the community.

Healthy and Thriving Early Childhood Experiences

Background

Having a strong and coordinated system of early childhood services in Carroll County will help families live and work within the County. Although Carroll County has the oldest median age of all Counties in the state of New Hampshire, services that address the needs of families raising children remain important. Even more so as the County positions itself to retain and attract young families to stay and thrive.

According to the U.S. Census, 3.6% of the population in Carroll County is below the age of five.¹ While the physical environment of the County offers ample opportunity for families to live active and healthy lifestyles, there are challenges that hamper families that currently live in the County or are considering relocating here. Housing availability is extremely limited and this drives upward pressure on the cost of housing in the County. Of the population that rents homes in Carroll County, 44% are cost burdened² and of those with mortgages, 35% are cost burdened. There are also disparities in median income between married-couple families, versus single-father and single mother headed families (see Figure 1 for more details).

County Level Data - Carroll

For further explanation of indicators, visit datacenter.kidscount.org.

Family Structure Among Families with Children Under Age 18, 2012-2016				
	All Families with Children	Married-Couple Families	Single-Father Headed	Single-Mother Headed
Number	4,251	3,054	462	735
Percentage	100%	71.8%	10.9%	17.3%

Median Family Income by Family Type, 2012-2016				
	All Families with Children	Married-Couple Families	Single-Father Headed	Single-Mother Headed
Estimate	\$56,922	\$69,808	\$39,605	\$27,250

Share of Homes that Are Cost-Burdened, 2012-2016			
	Rented Homes	Owned with Mortgage	Owned Outright
Percentage	43.7%	34.8%	18.4%

Figure 1: Family Structure and Median Income

Given the contextual challenges related to costs of living in the County, increased options for affordable early childhood services are crucial for families to be able to live and work here. As a priority of the initial CHIP, early childhood services have become more well-coordinated over the past five years. The County has seen the development of local initiatives working together to promote a coordinated spectrum of services, including childcare, home visiting, and early supports and services.

¹ U.S. Census: <https://www.census.gov/quickfacts/fact/table/carrollcountynewhampshire,US/PST045219>

² <https://datacenter.kidscount.org/data#NH/2/0/char/0>

Carroll County now hosts two regional Early Childhood Coalitions: the Mt. Washington Valley Early Childhood Coalition and the Southern Carroll Early Childhood Coalition. Both groups bring together regional early childhood stakeholders to coordinate services in their respective regions.

The Mt. Washington Valley Early Childhood Coalition successfully applied to be a part of the NH Preschool Development Grant (PDG) in 2019 and will be participating in the PDG Strategic- Planning Grant through July 2021. As the fiscal agent and coordinating entity for this initiative in Carroll County, Children Unlimited Inc. also participates in the NH Council for Thriving Children. A representative from the Southern Carroll Early Childhood Coalition participates in the Council as well. The work done under this grant and the NH Council for Thriving Children will further develop the roadmap for early childhood services in the County.

Another consideration for young people in Carroll County is the effect of Adverse Childhood Experiences. Research has demonstrated that the likelihood of developmental delays and later health problems, including heart disease, diabetes, substance misuse, and depression, increases for children who have had a greater exposure to adverse childhood experiences. These experiences, also referred to as "toxic stress", may include physical or emotional abuse, chronic neglect, caregiver substance misuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship. Research also indicates that supportive, responsive relationships with caring adults as early in life as possible can prevent or reverse the damaging effects of toxic stress response.³

Nearly half (49.5%) of all New Hampshire adults reported at least one ACE; 28% reported having 2 or more ACEs⁴

ACE score	Percent
0	50.5%
1	21.5%
2	10.1%
3	7.7%
4-7	10.2%

For complete details on the New Hampshire survey, please refer to the original report, "Health Indicators in Adults and Adverse Childhood Experiences (ACEs)⁵," prepared by Maternal and Child Health Section, Division of Public Health Services, New Hampshire Department of Health and Human Services.

³ Harvard University's Center on the Developing Child: <http://developingchild.harvard.edu/science/key-concepts/toxic-stress/>

⁴ <https://sparknh.daveystrategies.com/aces/>

⁵ <https://www.dhhs.nh.gov/dphs/bchs/mch/documents/nh-aces-report.pdf>

*There is not a single set list of experiences that comprise what researchers refer to as ACEs. The original ACEs study conducted between 1995-1997 by CDC-Kaiser Permanente has been adapted and expanded. A comprehensive list of ACEs surveys can be found here.⁶

Childhood Lead Poisoning also continues to be an issue in Carroll County. Being a county with a large percentage of housing stock built before 1978 (the year the use of lead in paint became outlawed), the risk for childhood lead poisoning remains high. Since 2015, nearly 40 children under the age of 3 years old have been found to have elevated blood lead levels per year in Carroll County.⁷ This remains a challenge that we must address to promote healthy development during early childhood years and beyond.

State and Regional Assets

Carroll County has experienced great growth in efforts and partnerships related to early childhood in recent years. This growth has resulted in coordinated efforts to address the most glaring needs facing the County's early childhood service infrastructure and these partnerships will serve the County moving forward. State and regional partners addressing this priority include:

- Tri-County Community Action Program/Head Start
- Children Unlimited, Inc.
- The Children's Center of Wolfeboro
- Central NH Visiting Nurse Association
- Women, Infant and Children Program
- Memorial Hospital
- Huggins Hospital
- Saco River Medical Group
- Childcare Aware of NH
- Mt. Washington Valley Children's Museum
- Believe in Books Literacy Foundation
- White Mountain Community Health Center
- Carroll County Public Libraries
- Mt. Washington Valley Early Childhood Coalition
- Southern Carroll Early Childhood Coalition
- Building Resilience MWV
- NH Healthy Homes and Lead Poisoning Prevention Program
- Crossings
- New Futures
- Northern Human Services
- Governor Wentworth Regional School District

⁶ <https://www.acesconnection.com/g/resource-center/blog/resource-list-extended-aces-surveys>

⁷ 2019 Lead Exposure Data Brief for the Carroll County Region: <https://tiny.mce.nh.wis.net/plugins/moxiemanager/data/files/docs/>

Goals, Objectives, and Strategic Approach

Goal: Make Carroll County a place where families can access resources to raise healthy and thriving children so they can live and work in the County.

Objectives:

1. Increase Lead Poisoning Prevention awareness and increase blood lead level testing rates in the County.
2. Increase awareness and understanding of Home Visiting resources in the County for families and providers.
3. Increase information and support for first-time parents and parents of children with special needs
4. Increase the ability of communities to promote resilience amongst families and young children.
5. Increase options for families to access quality childcare in the County.

GOAL	Make Carroll County a place where families can access resources to raise healthy and thriving children so they can live and work in the County.
OBJECTIVE 1	Increase Lead Poisoning Prevention awareness and increase blood lead level testing rates in the County.
STRATEGIC APPROACH	
Bring more point-of-care blood lead level testing resources to the County.	
Provide education and resources to families.	
Increase stakeholder involvement in lead poisoning prevention initiatives.	

OBJECTIVE 2	Increase awareness and understanding of Home Visiting resources in the County for families and providers.
STRATEGIC APPROACH	
Work with early childhood service providers to spread awareness of Home Visiting resources in the County.	
Provide information and education to families about Home Visiting resources in the County.	
Promote Home Visiting Resources throughout all sectors working with families in the County.	
OBJECTIVE 3	Increase information and support for first-time parents and parents of children with special needs.
STRATEGIC APPROACH	
Work with County Birthing Unit to provide first-time parents with early childhood resources.	
Partner with Pediatric Practices to provide information about resources for children with special needs.	
Promote Home Visiting services to all eligible families.	
Promote services offered by the County's Family Resource Center.	
OBJECTIVE 4	Increase the ability of communities to promote resilience amongst families and young children.
STRATEGIC APPROACH	
Participate in Building Resilience MWV Coalition.	
Increase trainings on trauma and resilience for all community sectors.	
Explore cross-sector partnerships to provide support to families affected by trauma.	

OBJECTIVE 5	Increase options for families to access quality childcare in the County.
STRATEGIC APPROACH	
Increase training and continuing education opportunities for early childhood professionals.	
Identify areas in need of more childcare options in the County.	
Work collaboratively to incentivize and promote childcare options in areas of most need.	

Summary

In order to make Carroll County a place where families and young children can be healthy and thriving, we must continue to focus on early childhood services. Increasing pressure on families in other facets of their lives make coordinated, quality, and accessible services more crucial than ever. We will continue to work with key partnerships forged during the last version of the CHIP and grow new partnerships in parts of the county that need attention related to this issue. A strong start is fundamental to growing a healthier Carroll County.

Public Health Emergency Preparedness Across the Lifespan

Background

Public Health Emergency Preparedness (PHEP) continues to be a Community Health priority for Carroll County. The Carroll County Coalition for Public Health receives guidance from the Centers for Disease Control and Prevention (CDC) on preparedness capabilities. These capability standards have served as a vital framework for our preparedness program to plan, operationalize, and evaluate our ability to prepare for, respond to, and recover from public health emergencies. Public Health Emergencies include the spread of infectious disease, environmental events, bio-chemical hazards, acts of terrorism or natural disasters. The importance of Public Health Emergency Preparedness has been highlighted during the COVID-19 Pandemic and the aftereffects are sure to last through the duration of this CHIP and beyond.

C3PH recognizes that in order to protect and preserve the health of the people of this region, it is of utmost importance to be prepared for all health hazards that could arise. Carroll County PHEP partners participated in a Jurisdictional Risk Assessment (JRA) process in 2018-2019. This JRA built upon the work done through the Hazard Vulnerability Assessment that took place in 2012-2014. Based on the findings of the JRA, PHEP partners identified which mitigation strategies to implement in Carroll County¹:

Implementation of Selected Mitigation Strategies

Based on these voting results, the top two strategies were selected for implementation:

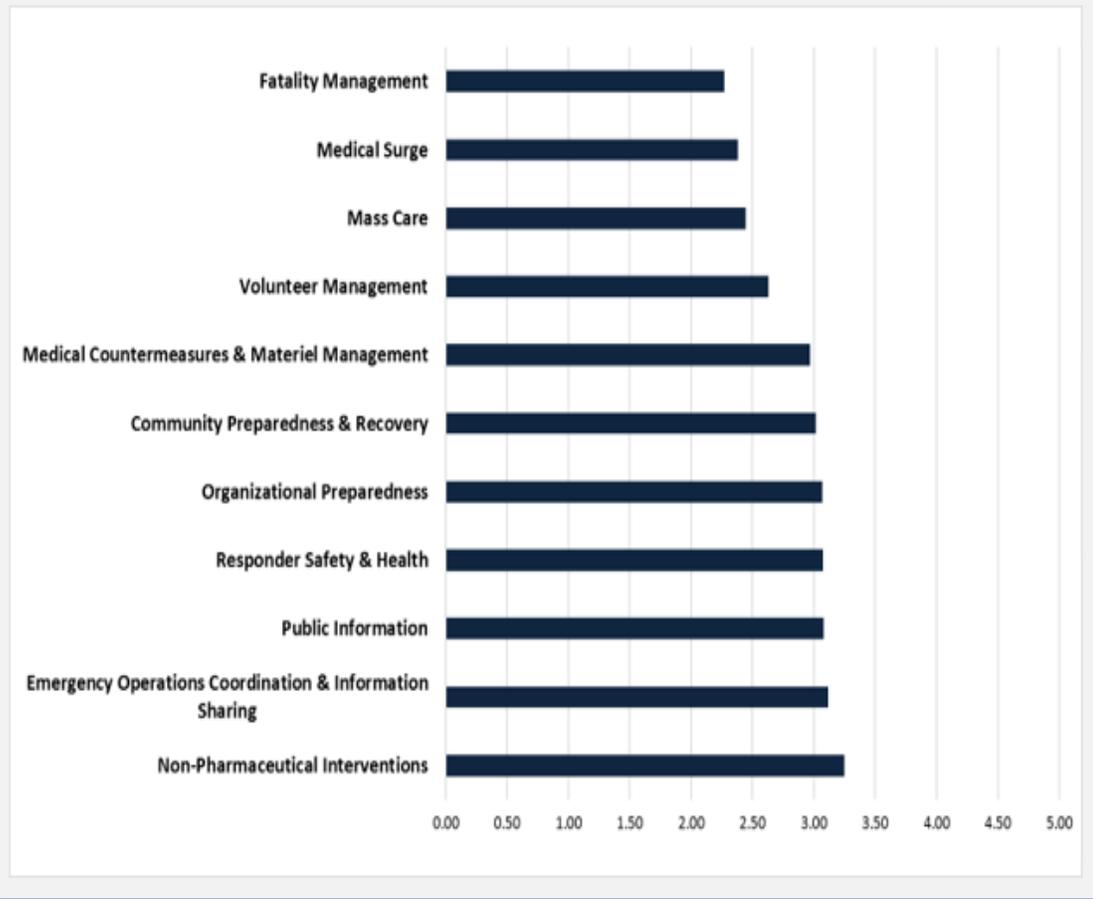
1. Strengthen engagement of regional partners in the PHN.
 - a. Engage additional partners.
 - b. Promote the benefits of involvement in PHN activities to organizations, including senior leadership.
 - c. Ensure partners are aware of the capabilities and roles of the PHN and other partners.
2. Provide training and exercise opportunities to partners

¹2018-2019 Carroll County Public Health Network Jurisdictional Risk Assessment: Summary of Findings

Preparedness Ratings

Figure 1 shows the average preparedness rating given by JRA survey respondents for each preparedness category. Note that each category was made up of 3-10 questions, each of which were rated on a 5-point scale ranging from No Capacity (1) to Full Capacity (5).

Figure 1: Preparedness Ratings, by Category



C3PH has played an active role in the County's Response to the COVID-19 Pandemic. At the time of this current CHIP's publication, the COVID-19 response is ongoing. The regional Multi -Agency Coordinating Entity (MACE) was activated in response to the COVID-19 Pandemic. C3PH's PHEP Program coordinated services in response to the Pandemic, including: assisting County Hospitals in Surge Planning and establishing Alternative Care Sites, establishing a fixed COVID-19 testing site in the County, collaborating with County Partners to develop Closed and Open Points of Dispensing plans, and establishing a fixed site for vaccination for COVID-19 – all in accordance with protocols established by the NH Division of Public Health Services. C3PH will be utilizing these CPODS and Open PODS to provide vaccinations throughout the region and will serve as an integral partner in all vaccine efforts in Carroll County. The After-Action Report for the response to COVID-19 will be crucial to PHEP services in the County for years to come.

School Based flu Clinics remained an important service offer by C3PH throughout the duration of the last CHIP. Sustaining this service will remain a priority in this current version of the CHIP as well. Over 700 students were vaccinated in 2019 and, despite the challenges presented by the COVID-19 Pandemic, 432 students were vaccinated in 2020. These vaccinations come at no-cost to families and help Carroll County prepare for seasonal influenza, lessening the burden on our healthcare partners, and improving absenteeism. This program will continue as a crucial element of PHEP for the County over the duration this current CHIP.

Regional emergency Sheltering needs will also be addressed under this Priority. Given the decentralized source of many services in the County, Regional Sheltering will be a focus of PHEP work under this current CHIP. Some planning efforts have been conducted in recent years to assist municipalities in planning for emergency sheltering situations. A regional training on municipal emergency sheltering was held in Wolfeboro in December of 2018. A shelter plan template has been identified and is available for County partners to develop and increase their capacity to address the need for emergency sheltering. Increasing these training opportunities will also be an important component PHEP work under this current CHIP as well.

Volunteers efforts related to Public Health Emergency Preparedness and Response continue to be an important element of this priority. C3PH has assembled a robust Citizen Corps, which is comprised of Medical Reserve Corps and Community Emergency Response Teams (CERT). Currently there are 42 CERT members and 120 Medical Reserve Corps members active in the County. C3PH has also coordinated multiple 20-hour CERT training opportunities since the last version of the CHIP was published. These trained volunteers have served at school-based flu clinics, mobile food pantries, search and rescue in coordination with NH Fish and Game, shelter planning and training, and stand ready to assist with any emergency response needs in the County. Recently, a new COVID volunteer team has formed in response to the COVID-19 Pandemic. This team is a combination of MRC and CERT members and specifically stands ready to serve in roles related the COVID-19 response in the County. Efforts to continue building local PHEP strength and capacity will continue under this current version of the CHIP.

State and Regional Assets

The following is a list of the organizations are actively involved with emergency preparedness and response issues in Carroll County:

- Memorial Hospital
- Huggins Hospital
- Gibson Center for Senior Services
- The Way Station
- Central NH VNA and Hospice
- Visiting Nurse Homecare and Hospice
- MWV Adult Day Center
- Municipal Emergency Medical Services
- Town Selectboards

- Fire and Rescue Departments
- Police Departments
- School Administrative Units
 - SAU 9
 - SAU 49
 - SAU13
 - SAU 101
 - SAU 45
- Emergency Management Directors
- Municipal Health Officers
- Carroll County Sheriff's Office and House of Corrections
- NH State Police Troop E
- Mountain View Nursing Home
- Citizen Corps Volunteers
- The Disaster Behavioral Health Response Team (DBHRT)
- NH National Guard
- Community Health Institute
- Granite State Health Care Coalition
- NH Department of Health and Human Services
 - NH Division of Public Health Services
- NH Department of Safety
 - NH Homeland Security and Emergency Management

Goals, Objectives, and Strategic Approach

Goal: Carroll County is prepared for all health hazards and public health emergencies.

Objectives:

1. Increase Personal Preparedness in Carroll County.
2. Increase Regional Public Health Emergency Preparedness.
3. Expand the ability for Carroll County to respond and recover before, during, and after a Public Health Emergency.
4. Enhance regional emergency sheltering resources in Carroll County.

GOAL	Carroll County is prepared for all health hazards and public health emergencies.
OBJECTIVE 1	Increase Personal Preparedness in Carroll County.
STRATEGIC APPROACH	
Developing inclusive plans – plans that covers the needs of all community members – across the lifespan.	
Immunization Clinics for emergency and non-emergency events.	
Disseminate information to Carroll County Public Network Partners	
OBJECTIVE 2	Increase Regional Public Health Emergency Preparedness
STRATEGIC APPROACH	
Provide PHEP Training Opportunities to Regional Partners.	
Increase Regional Partner Engagement in PHEP initiatives.	
Increase stakeholder engagement and initiatives related to the Multi Agency Coordinating Entity (MACE).	
Update regional Public Health Emergency Annex (RPHEA).	
Increase planning and training for Point of Dispensing (PODs) in the region, public and closed.	

OBJECTIVE 3	Expand the ability for Carroll County to respond and recover before, during, and after a Public Health Emergency.
STRATEGIC APPROACH	
Coordinate COVID-19 Response debrief with key stakeholders and write After Action Report.	
Coordinate state and local resources and partners to mitigate risk and respond to future Public Health Emergencies.	
Expand regional Public Health Emergency Preparedness exercises.	
OBJECTIVE 4	Enhance regional emergency sheltering resources in Carroll County.
STRATEGIC APPROACH	
Increase regional Emergency sheltering resources - tools and resources to assist municipalities in shelter planning.	
Expand regional partner engagement in emergency sheltering.	
Increase options for regional emergency sheltering locations.	

Summary

Public Health Preparedness and Response remains an important Public Health Priority in Carroll County. The Response to the COVID-19 Pandemic and the lessons we have learned collectively will shape Public Health Emergency Preparedness in the County for years to come. School Based flu clinics continue to play a crucial role in preparing Carroll County for seasonal influenza and will remain a key focus throughout the duration of this CHIP. Regional Sheltering planning is another need that will be addressed under the PHEP Priority. Lastly, the continued commitment of the Carroll County Citizen Corps will help C3PH carry out its PHEP mission.

Resources

[Carroll County Coalition for Public Health Website](#)

[County Health Rankings and Roadmaps](#)

[NH Healthy Aging Data](#)

[NH Healthy Homes and Lead Poisoning Prevention Program](#)

[2019 Carroll County Youth Risk Behavior Survey Results](#)

[NH Division of Public Health Services](#)

[The Doorway NH](#)

[NH Bureau of Drug and Alcohol Services](#)

[Huggins Hospital 2019 Community Health Needs Assessment](#)

[Memorial Hospital 2019 Community Health Needs Assessment](#)