

# Littleton Healthcare Service Area Community Needs Assessment

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Prepared for:  
Ammonoosuc Community Health Services  
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# Littleton Healthcare Service Area Community Needs Assessment

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## **Methodology**

With the assistance of the North Country Health Consortium, Ammonoosuc Community Health Services, Littleton Regional Hospital and North Country Home Health Agency, worked collaboratively to conduct a Community Needs Assessment consisting of three parts:

- Key Informant Interviews
- Community Survey
- Demographic and Health Status Data Analyses

The Community Needs Assessment was conducted from June to August 2001. The Methodology for each part of the project is outlined below.

### **Key Informant Interviews**

A total of 58 key leaders from the Littleton area participated in four group interviews. The groups included the Littleton 2005 Task Force, the Littleton Alliance, the Rotary Club and the Littleton Chamber of Commerce Board of Directors.

A community leader interview/survey guide, approved by the three agencies, was used to arrange and focus the interviews. The following protocol was used:

At the group interview:

- The purpose of the interview/survey and the role of the key leader was explained in terms of the NH Community Benefits Legislation;
- Participants were given copies of the interview/survey tool and given time to write down their thoughts;
- Responses to the survey questions were discussed as well as strategies to address the issue(s) of highest priority; and
- The next steps in the process were explained.

The following questions were included in the group interview:

How would you rate the quality of health care services in the Littleton area?

What thoughts or issues came to mind when you gave your rating?

How would you rate the accessibility of health care services in the Littleton area?

What thoughts or issues came to mind when you gave this rating?

What, if any, health-related programs or services in this community have been important to you and your family?

How important are these health care issues to our community?

Oral health, smoking and obesity

Can you name another healthcare issue that is important to our community?

What programs, services or strategies would you suggest for addressing our most pressing health or healthcare issues?

A copy of the Key Leader Interview/Survey Guide is included in the Appendix.

## **Community Survey**

A survey tool was developed that would assess the broader health and wellness needs of the community. The surveys were distributed to the participating health care agencies for placement in each facility for their consumers to complete. A press release was printed in the local weekly newspaper announcing the survey, indicating where surveys could be found in each of the area communities (town offices, libraries, etc.) and indicating the dates they were available. Surveys were also distributed at the local senior center, at commodity food distribution sites, WIC clinics and to home health clients. Surveys were collected at the end of a month's time. A total of 265 surveys were completed. Information on the respondent's town of residence was collected. Survey questions focused on the following areas:

Quality of life in their town;

Things they like most about their town covering the topics of community, religion, children, recreation, health/medical services, arts and culture, housing and safety;

Health status of people in their community;

Three most pressing issues facing their community including opportunities for youth, services for senior citizens, recreation programs, affordable health and dental care, etc.;

Access to health care services;

Health-related programs or services important to their family;

Additional services they would use if available; and

Sought suggestions for changes that would improve health in their community.

The Community Survey is provided in the Appendix.

The Community Health Institute, Inc. analyzed the data from the key informant interviews and the community survey and provided results.

## **Demographics and Health Status Data Analyses Methodology**

Because two of the agencies involved in this community assessment serve more than one health care service areas, health status data is presented from both the Littleton HSA and the Haverhill HSA. Data sources are cited in the text and include New Hampshire's Primary Care Access data, data from Health Care Service Area Profiles provided by the NH Department of Health and Human Services, 2000 Census figures and the NH Behavioral Risk Factor Surveillance System data. Some data is simply not available specifically for Littleton and/or the Haverhill Hospital Service Areas so selected data for Grafton County was investigated.

## **Executive Summary**

This report presents the results of interviews with 58 community leaders and 265 community surveys that were conducted as part of the Littleton Area Health Needs Assessment. The purpose of the interviews and surveys was to gather information from community leaders and residents about current health care resources and to obtain suggestions for improving the health care services to better meet community needs. Key findings of the interviews and surveys are summarized as follows.

- Community leaders and residents are generally satisfied with the existing health care system. Community leaders perceive access to and quality of health care services as good overall. However, only 27% of residents perceive the health of people in their town to be very good or excellent.
- Community leaders and residents observed that lack of affordable health services and insurance is a barrier for some residents, especially the elderly (e.g. affordable medications) and low-income persons who do not qualify for subsidized programs. Among respondents to the community survey, about 20% reported having difficulty accessing needed health services in the past year.
- The three most pressing issues facing the community according to area residents are:
  - ◆ Lack of opportunities for youth (42%);
  - ◆ Lack of affordable health care (33%); and
  - ◆ Lack of public transportation (32%).

The need for affordable health service/insurance options was also most commonly cited by community leaders and community residents in response to open-ended, unprompted questions.

- Other key areas for improving the health care system identified by both community leaders and residents include:
  - ◆ improved availability of medical specialists, dentists and health facilities;
  - ◆ more disease prevention and health education programs;
  - ◆ services for seniors;
  - ◆ recreational/fitness programs; and
  - ◆ smoking cessation programs including local no smoking ordinances for public places.

## **Key Informant Interviews**

Key informant interviews were conducted with 58 identified leaders in the community. An open-ended survey instrument was used to solicit feedback from community leaders on the quality, accessibility, and usefulness of available health services in the community. Participants were asked to rate their responses on a scale of 1 to 5 where 1 represented “poor” and 5 represented “excellent”. Findings of the key informant interviews are summarized below.

### **1. Quality of Health Care Services**

As reported in Table 1 (page 8), respondents rate the quality of health care services in the area fairly high on average (3.7 on a 5 point scale). The majority (57%) of respondents rated the quality of health care services as either a “4” or “5” and only one percent (1%) of respondents rated quality below a “3”.

Respondents were asked to clarify their quality rating through discussion. The most common factors contributing to a high quality rating included the new hospital facility (14% of respondents) and the variety of physicians in the area (7%). Seven percent (7%) of respondents observed that although the area is rural, residents have access to a broad range of quality health services. Other factors included access to good dental services, home health and hospice, veteran’s services, and proximity to Dartmouth and other health facilities in the region.

Respondents identified a number of factors perceived as barriers to quality. The most common concern among respondents was the lack of access to physicians (18% of respondents), especially specialists (9%) and dentists (4%) in the region. Five percent (5%) of respondents expressed concern about the lack of access to health care services for low income and uninsured residents. Public perception of LRH was rated low to moderate with 4% of respondents reporting negative feedback from patients and concerns about quality of services (5%). Four percent (4%) of respondents observed that distance negatively impacted access to health services especially for residents outside of town.

### **2. Accessibility of Health Care Services**

As reported in Table 1 (page 8), respondents also rate accessibility of health care services in the area fairly high at an average of 3.8 on a five point scale. The majority (60.4%) of respondents rated accessibility as either a “4” or “5”. Seven percent (7.0%) of interviewees did rate accessibility relatively low with a “2” rating, while none rated accessibility as low as “1” or “poor”.

Respondents were asked to clarify their accessibility rating. The most common factors contributing to good accessibility to health care services included the new hospital facility (5%) and accessible locations for the hospital and medical offices (9%). Four percent (4%) of respondents observed that no one is turned away for service regardless of ability to pay.

Respondents identified a number of factors, which negatively impact accessibility to health care services in the area. Fourteen percent (14%) of respondents believed that high cost and lack of access to insurance was a major barrier to access. Nine percent (9%) of respondents said that

lack of transportation especially for residents outside Littleton was a barrier to access. Other commonly identified barriers included long waiting periods for appointments (7%); and lack of available providers including generalists (7%), specialists (5%) and dentists. Residents are forced to travel outside of the service area for selected services. Another barrier to access is the lack of awareness of users about appropriate health seeking behavior.

### 3. Priority Health Services

Respondents were asked to identify health-related programs and services, which are important to them or their families. Most important to respondents was availability of primary care physicians (16%) and a hospital (11%). Also important were home health services (9%), hospice (5%), and emergency services (9%). High priority specialty services included oncology services (5%) and cardiac care (5%). Respondents also mentioned pharmacy services, prenatal and delivery, dental and mental health services.

Respondents were also asked to rank selected health care issues in order of their importance to the community including specific questions about dental, smoking and obesity services. Surprisingly, none of the three specifically identified issues received a relatively high priority rating. As shown in Table 1 (page 8), none of the three items was ranked as a high priority (4 on a 4 point scale) by more than a third of interviewees. Also interestingly, dental services ranked lowest relatively with an overall rating of 2.6 out of 4.0. This finding should be balanced with the independent observation in the prior question that access to dental services was a problem. Smoking services were rated the highest among the three selected services with a rating of 2.8 out of 4.0. Respondents identified a number of other services, which were important for the community including cancer (5%), mental health (7%), home health (7%), pharmacy services (3%), cardiac care, nutrition, and substance abuse services.

### 4. Recommendations for Improving the Health Care System

Respondents were asked to identify programs, services or strategies, which would address the most pressing health or health care issues in the community. Respondents identified two priority issues, affordability of health services and increased availability of educational programs. Eighteen percent (18%) of respondents advocated for affordable health services and/or access to health insurance as an essential strategy for addressing the community's health care problems. An additional 11% and 4% of respondents identified the need for affordable dental and pharmacy services, respectively. Eighteen percent (18%) of respondents promoted educational programs and resources including a directory of health services and educational programs for new parents, preventive services, and how to access health care services.

Other strategies included recruiting more primary care providers to the area (7%), improved access and health care services for disabled persons (4%), services for seniors (4%), and public transportation to better access health services in town (4%). A number of respondents identified the need to work collaboratively with state, regional and local representatives to promote health improvement.

Table 1. Key Information Survey Results

Characteristic of Health Care System	Overall Rating	% of Respondents Rating Option				
		1	2	3	4	5
Quality of health care	3.7		1.7%	41.4%	43.1%	13.8%
Accessibility of health care	3.8		7.0%	31.6%	36.8%	24.6%
Priority health issues						
Dental	2.6	17.9%	30.4%	26.8%	25.0%	
Smoking	2.8	16.7%	16.7%	35.2%	31.5%	
Obesity	2.7	16.7%	24.1%	27.8%	31.5%	

## Community Survey

Written surveys were made available in various locations throughout the community and were completed by 265 residents. The survey instrument used closed and open-ended questions to gather comments and suggestions from residents on community assets and barriers, perceived health status, access to health services, usefulness of available health services in the community and recommendations for improving the health care services. Findings of the survey are summarized below and response detail by question is attached following the summary.

### 1. Profile of Respondents

Respondents were asked to identify their town of residence and the number of years they have lived in the town. The majority of respondents were from Littleton (42%), Lisbon (11%) and Bethlehem/Twin Mountains area (10%). Nearly twenty percent were from an additional seven towns including Franconia (5.3%), Woodsville (3.8%), Haverhill (non-Woodsville) (3.4%), Sugar Hill (2.6%), Lincoln/Woodstock (2.6%), Landaff (2.3%), and Lyman (2.3%). The remaining 13.9% of respondents were from a wide variety of other towns in the region. Respondents were relatively senior on average having lived in their town an average of 25 years with a range of 1 to 88 years. The median length of time residing in town was 18 years.

### 2. Community Assets and Barriers

Respondents were asked what three things they liked most about their town and what were the most pressing issues facing their community. A majority of respondents (54%) rate the quality of life in their town as very good or excellent, while 10% rate quality of life as fair or poor.

Survey respondents' most frequent response to what they liked best about their town was the fact that it is safe and the crime rate is low (51%). Forty-two percent (42%) of respondents rated the natural beauty/environment and good friends/neighbors among the best characteristics of their town. Other highly rated features included a good place to raise children (36%) and availability of health and medical services (21%). Respondents identified housing (18%), community involvement (16%) good schools (14%), religious/spiritual values (13%), and strong family life (11%) as positive features of their town. Less than ten percent (10%) of respondents mentioned social support services, good job opportunities, recreation opportunities and arts and cultural events.

***Respondents were asked to identify three pressing issues facing their community. Over one third of all respondents identified three key issues including lack of opportunities for youth (42%), lack of affordable health care (33%) and lack of public transportation (32%). Other common responses were lack of affordable dental care (28%), lack of services for senior citizens (21%) and lack of recreational programs (15%). Respondents reported alcohol and drug abuse (11%), unemployment (11%), teenage pregnancy (9%), poverty (8%), lack of support groups (7%), and abandoned buildings and vacant lots (7%) as problems. Less than five percent of respondents mentioned mental health, child abuse, lack of health education, high taxes, and crime and violence.***

### 3. Perception of Health Status

Respondents were asked to rate perceived health status in their town. Sixty-one percent (61%) of respondents rated health status as good. Approximately one quarter of respondents rated health status very good and only 2% as excellent. Twelve percent (12%) of respondents rated health status as fair or poor.

### 4. Access to Health Care Services

The majority (80%) of respondents report no difficulty getting health care services for themselves or their family. The twenty percent of respondents who have had difficulty report high cost (11%) and lack of insurance (7%) as major barriers to access. Other barriers include lack of transportation, lack of knowledge about where to go for services, long waiting times, misunderstanding with staff and language/cultural barriers.

Respondents identified health related programs and services which are important to them. Most frequently reported responses included home health related services, senior services, hospital services, WIC, mental health and community health center services.

***Respondents were asked to identify programs or services, which they would use if available. Consistent with pressing issues facing their community, 28% of all respondents identified the need for more services for senior citizens and public transportation; twenty percent (20%) of respondents requested more recreational programs, fitness/exercise programs, farmer's market and dental services. Other programs and services sought by respondents include programs for youth (17%), medical services (12%), smoking cessation programs (11%) and nutrition/cooking programs (10%).***

### 5. Recommendations for Improved Health of the Community

Respondents were asked to identify opportunities for improving the health of the community. Increased affordability and availability of health care services were identified as priorities. Respondents identified the need for affordable health care services and pharmaceuticals, and affordable health and dental insurance. Low-income persons not eligible for Medicaid and seniors were identified as particularly vulnerable to the high cost of health care and pharmaceutical costs. Increased availability of health care services including primary care, specialty, mental health and dental services closer to where people live.

Respondents also identified a need for more health education/prevention programs, public transportation, and community programs for seniors, youth and families. Prevention programs included smoking cessation programs, family support, parenting classes and health promotion. Respondents identified a need for public transportation as well as transportation to health facilities. Respondents would like to see more recreational/fitness programs for residents. More programs for seniors to increase opportunities for isolated elders to engage with others and to assist them with daily living were also recommended.

## Demographic and Health Status Data Analyses

What follows is selected information on the socioeconomic and health status of the populations served by Ammonoosuc Community Health Services, Littleton Regional Hospital and North Country Home Health Agency. In general terms, the Littleton and Haverhill Health Care Service Areas (HSAs<sup>1</sup>) conform roughly to the areas served by these institutions and will be used as the common components for reporting these data.

### Littleton and Haverhill HSA Towns Served by Ammonoosuc Community Health Services Littleton Regional Hospital North Country Home Health Agency

<i>Littleton HSA<sup>2</sup></i>		<i>Haverhill HSA</i>	
<i>Town</i>	<i>Population</i>	<i>Town</i>	<i>Population</i>
Bethlehem	2,199	Bath	893
Carroll	663	Benton	314
Dalton	926	Haverhill	4,416
Easton	256	Monroe	759
Landaff	378		
Lincoln	1,271		
Lisbon	1,587		
Littleton	5,845		
Lyman	487		
Sugar Hill	563		
Whitefield	377		
Woodstock	1,139		
<b>Total Littleton HSA</b>	<b>18,276</b>	<b>Total Haverhill HSA</b>	<b>5,244</b>

The next table displays some of the socioeconomic characteristics of the Littleton and Haverhill HSA populations compared with state averages.

<sup>1</sup> Health Care Service Areas (HSAs) are sets of towns representing contiguous communities that share health care resources and have similar health outcomes. Data from HSA profiles, compiled by the NH Department of Health and Human Services, display information provided from uniform hospital discharge data reports.

<sup>2</sup> 2000 Census of Population and Housing, prepared by U.S. Department of Commerce, 5/2001.

**Selected Socioeconomic Characteristics of Littleton and Haverhill HSA Populations<sup>3</sup>**

<i>Characteristic</i>	<i>Haverhill HSA</i>	<i>Littleton HSA</i>	<i>Area Average<sup>4</sup></i>	<i>State Average</i>
% Receiving Medicaid/Food Stamps (children and adults)	21.7%	16.3%	19%	11.2%
Median Family Income (1998)	\$34,126	\$32,121	\$33,123.50	\$48,819
Per capita income (1996) <sup>5</sup>	\$13,925	\$15,292	\$14,608.50	\$18,697
Population Density (persons per sq. mi.)	38	29	34	132
Year 2000 age distribution (% of total population) <sup>6</sup>				
< 5 years	4.5%	5.5%	5%	6.1%
5-19 yrs	21.1%	20.3%	20.7%	21.7
20-34 yrs	15.9%	15.8%	15.9%	18.6%
35-54 yrs	30%	32.9%	31.5%	32.8%
55-64 yrs	10.2%	11%	10.6%	8.9%
65+ yrs	18.3%	14.6%	16.5%	12%

It is fairly clear from these data that the residents of both the Littleton and Haverhill HSAs display many of the characteristics of a population in need. For example a median family income that is almost 30 percent below the state average, a population over the age of 65 that is 25 percent higher than the state average and a population density that is 75 percent lower than the state average are all classic indications of economic deprivation.

The next table displays selected measures of the Health status of the Haverhill and Littleton HSA populations. Specific data on the health status of these citizens are difficult to obtain because the population to be measured is so small. However, in the Health Care Service Area Profiles as well as “Assessing New Hampshire’s Communities: Primary Care Access Data, 1993-1997” contain some information on the health status of the service area population.

**Selected Measures Of The Health Status of the NCHC Population**

<i>Risk Indicators</i>	<i>Haverhill</i>	<i>Littleton</i>	<i>Area Average<sup>7</sup></i>	<i>State Average</i>
<i>Infant Health</i>				
Late/no prenatal care	1.6%	1.2%	1.4%	1.7%
Maternal smoking	23.6%	26.2%	24.9%	17.6%
Low birth weight	6.0%	4.9%	5.5%	5.2%

<sup>3</sup> Assessing New Hampshire’s Communities: Primary Care Access Data, 1993-1997,” prepared by the Division of Epidemiology and Vital Statistics, New Hampshire Department of Health and Human Services

<sup>4</sup> Averages are not adjusted for age or population differences within each HSA and are used only as gross comparisons with state averages.

<sup>5</sup> Data from Health Care Service Area Profiles

<sup>6</sup> 2000 Census of Population and Housing

<sup>7</sup> Averages are not adjusted for age or population differences within each HSA and are used only as gross comparisons with state averages.

<b><i>Risk Indicators</i></b>	<b><i>Haverhill</i></b>	<b><i>Littleton</i></b>	<b><i>Area Average<sup>7</sup></i></b>	<b><i>State Average</i></b>
Mother's age < than 20 yrs	10.4%	9.4%	9.9%	7.3%
<b>Adult Health</b>				
Mortality from Heart Disease	131	104	117	
Mortality from Diabetes	45			
Rate of "premature deaths" (between ages of 18 and 64)	3.1%	2.6%	2.8%	2.9%
<b>Observations on Current Health</b>				
Percent of service area population age 65 and under characterizing its health as good, very good or excellent	94.4%	94.4%	94.4%	94.8%
Percent of population under age 65 characterized as having a chronic condition lasting a year or more.	9.9%	6.6%	8.2%	5.9%
Percent population, age 16-64, out of workforce because of a disability	3.6%	3.5%	3.5%	2.9%
<b>Observation On Use Of Health Care</b>				
Percent of population under age 65 not confident of access to health care	19.7%	23.5%	21.6%	19.0%
Percent of population under age 65 indicating no usual source of health care	7.1%	7.5%	7.3%	6.9%
Percent of population under age 65 who did not see a dr. in the past year (1998/1999)	13.4%	13.9%	13.6%	11.7%
Percent of population under age 65 who did not see a dentist in the past year (1998/1999)	32.0%	26.0%	29%	21.9%

Some data on the health status, specifically, of the Littleton and Haverhill populations is simply not available. However, selected data for Grafton County<sup>8</sup> is available and is presented as follows:

- In the period 1992-1996, the Grafton County rate (unadjusted "crude" rate) of premature death due to Diabetes Mellitus per 100,000 population less than 65 years of age was 97., much higher than the state overage of 69.
- In the period 1992-1996, the Grafton county rate (unadjusted "crude" rate) of death per 100,000 population less than 65 years old due to cancer was 746, lower than the state average of 813.7.
- In the period 1992-1996, the Grafton County rate (unadjusted "crude" rate) of premature death due to heart disease per 100,000 population less than 65 years old was 486, higher than the state average of 457.

<sup>8</sup> 1991-1995 New Hampshire Behavioral Risk Factor Surveillance System (BRFSS) data for lifestyle health factors by county (the most recent and representative behavioral risk data set available by county.)

- From 1992-1996, the Grafton County rate of premature death due to chronic obstructive pulmonary disease per 100,000 population less than 65 years old was 38, lower than the state rate of 49.
- In 1991-1993 and 1995, 30 percent of Grafton County adults reported not having had their cholesterol checked within the past five years about the same as the state average for the same period.
- In 1991-1993 and 1995, about one fourth of Grafton County residents reported they had been told they had high blood pressure, considerably higher than the state average of 20 percent for the same period.
- The average overweight rate for Grafton County residents from 1991-1995 was 25 percent of adults, somewhat higher than the state average of 24 percent for the same period.
- Grafton County residents are on a par with the state average of just over 50 percent of adults reporting a sedentary lifestyle during the period of 1991-1994.

## **Appendices**

Key Informant Interview/Survey Guide  
Community Survey Form  
Community Survey Results

# *Littleton Area Health Needs Assessment*

## Community Leader Interview/Survey Guide

Purpose: Littleton Area Health Care Organizations are interested in your opinions on the health of our community and suggestions for improvement. We value your input and appreciate your time and consideration of the following questions.

Name (optional):

Profession:

1. On a scale of 1 to 5 where 1=Poor and 5=Excellent, how would you rate the **quality** of health care services in the Littleton area? \_\_\_\_\_

What thoughts or issues came to mind when you gave your rating?

2. On a scale of 1 to 5 where 1=Poor and 5=Excellent, how would you rate the **accessibility** of health care services in the Littleton area? \_\_\_\_\_

What thoughts or issues came to mind when you gave this rating?

3. What, if any, health-related programs or services in this community have been important to you and your family?

4. How would you rank these health care issues in order of importance to our community? (Use a scale of 1-4 where 1=low importance and 4=high importance, using each number once)

\_\_\_\_ Dental health  
\_\_\_\_ Smoking  
\_\_\_\_ Obesity  
\_\_\_\_ Other \_\_\_\_\_

5. What programs, services or strategies would you suggest for addressing our most pressing health or healthcare issues?

## LITTLETON AREA HEALTH NEEDS SURVEY

1. What town do you live in? \_\_\_\_\_

2. How many years have you lived there? \_\_\_\_\_ years

3. In general, how would you rate the quality of life in your town? (choose one)

- Excellent       Very good       Good       Fair       Poor

4. What *three* (3) things do you like most about your town? (Please check 3 items on the list below).

- |   |   |
|---|---|
| <input type="checkbox"/> Community involvement        | <input type="checkbox"/> Health/medical services    |
| <input type="checkbox"/> Schools                      | <input type="checkbox"/> Social support services    |
| <input type="checkbox"/> Religious/spiritual values   | <input type="checkbox"/> Good job opportunities     |
| <input type="checkbox"/> Good place to raise children | <input type="checkbox"/> Recreation opportunities   |
| <input type="checkbox"/> Strong family life           | <input type="checkbox"/> Natural Beauty/Environment |
| <input type="checkbox"/> Friends/Neighbors            | <input type="checkbox"/> Arts and cultural events   |
| <input type="checkbox"/> Housing/Home                 | <input type="checkbox"/> Other (_____)              |
| <input type="checkbox"/> Safety/low crime             |   |

5. In general, do you think people in your town are in excellent, very good, good, fair or poor health? (choose one)

- Excellent       Very good       Good       Fair       Poor

6. What do you think are the *three* (3) most pressing issues facing your community? (Please check 3 items on the list below).

- |   |  |
|---|--|
| <input type="checkbox"/> Lack of opportunities for youth      | <input type="checkbox"/> Mental Health                       |
| <input type="checkbox"/> Lack of services for senior citizens | <input type="checkbox"/> Teenage pregnancy                   |
| <input type="checkbox"/> Lack of recreational programs        | <input type="checkbox"/> Alcohol and drug abuse              |
| <input type="checkbox"/> Lack of affordable health care       | <input type="checkbox"/> Child abuse/domestic violence       |
| <input type="checkbox"/> Lack of affordable dental care       | <input type="checkbox"/> Lack of health education            |
| <input type="checkbox"/> Lack of support groups               | <input type="checkbox"/> Lack of affordable housing          |
| <input type="checkbox"/> Lack of public transportation        | <input type="checkbox"/> Abandoned buildings and vacant lots |
| <input type="checkbox"/> Poverty                              | <input type="checkbox"/> Crime and violence                  |
| <input type="checkbox"/> Unemployment                         | <input type="checkbox"/> Other issue (_____)                 |

**7. Have you or anyone in your family had difficulty getting health care services you need in the past year?**

No

Yes, for the following reasons (check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Didn't know where to go | <input type="checkbox"/> Couldn't afford the services |
| <input type="checkbox"/> No way to get there     | <input type="checkbox"/> Waiting time was too long    |
| <input type="checkbox"/> Office was not open     | <input type="checkbox"/> Misunderstanding with staff  |
| <input type="checkbox"/> No health insurance     | <input type="checkbox"/> Language/cultural barriers   |
|  | <input type="checkbox"/> Other (_____)                |

**8. What, if any, health-related programs or services in this area have been important to you and your family?**

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**9. What program or services would you and your family use if they were more available? (Please check all that apply).**

- |   |  |
|---|--|
| <input type="checkbox"/> Programs for youth           | <input type="checkbox"/> Nutrition/cooking program |
| <input type="checkbox"/> Services for senior citizens | <input type="checkbox"/> Healthy heart program     |
| <input type="checkbox"/> Recreational programs        | <input type="checkbox"/> Stop smoking program      |
| <input type="checkbox"/> Fitness/exercise programs    | <input type="checkbox"/> Diabetes support program  |
| <input type="checkbox"/> Community Gardening          | <input type="checkbox"/> Child Day Care            |
| <input type="checkbox"/> Farmer's market              | <input type="checkbox"/> Adult Day Care            |
| <input type="checkbox"/> Medical services (_____)     | <input type="checkbox"/> Public transportation     |
| <input type="checkbox"/> Dental Services              | <input type="checkbox"/> Job training              |
| <input type="checkbox"/> Mental Health Services       | <input type="checkbox"/> Substance abuse treatment |
| <input type="checkbox"/> Parent support services      | <input type="checkbox"/> Other service (_____)     |

**10. Finally, if you had the ability to change any one thing that you believe would contribute to better health in your community, what would you change?**

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## LITTLETON AREA HEALTH NEEDS SURVEY RESULTS

1. **What town do you live in?**
- 42.3% Littleton
  - 11.3% Lisbon
  - 10.2% Bethlehem/Twin Mountain
  - 5.3% Franconia
  - 3.8% Woodsville
  - 3.4% Haverhill (non-Woodsville)
  - 2.6% Sugar Hill
  - 2.6% Lincoln/Woodstock
  - 2.3% Landaff
  - 2.3% Lyman
  - 13.9% Other

2. **How many years have you lived there?**

Average = 24.9 years; median=18 years; range= 1-88 years

3. **In general, how would you rate the quality of life in your town?**

18.0%	Excellent
36.0%	Very good
35.6%	Good
9.2%	Fair
1.1%	Poor

4. **What *three* (3) things do you like most about your town?**

51.0%	Safety/low crime (131)	13.2%	Religious/spiritual values (34)
42.4%	Natural Beauty/Environment (109)	11.3%	Strong family life (29)
41.6%	Friends/Neighbors (107)	9.3%	Social support services (24)
35.8%	Good place to raise children (92)	5.1%	Good job opportunities (13)
20.6%	Health/medical services (53)	5.1%	Recreation opportunities (13)
18.3%	Housing/Home (47)	1.9%	Arts and cultural events (5)
16.0%	Community involvement (41)	1.9%	Other (3)
14.0%	Schools (36)		

**5. In general, do you think people in your town are in excellent, very good, good, fair or poor health?**

2.4%	Excellent
24.9%	Very good
60.6%	Good
11.6%	Fair
0.4%	Poor

**6. What do you think are the *three* (3) most pressing issues facing your community? (Please check 3 items on the list below).**

42.3% (105) Lack of opportunities for youth	9.3% (23) Teenage pregnancy
32.7% (81) Lack of affordable health care	8.1% (20) Poverty
32.3% (80) Lack of public transportation	6.9% (17) Lack of support groups
30.2% (75) Lack of affordable housing	6.9% (17) Abandoned buildings and vacant lots
27.8% (69) Lack of affordable dental care	4.8% (12) Mental Health
20.6% (51) Lack of services for senior citizens	4.4% (11) Child abuse
14.9% (37) Lack of recreational programs	2.4% (6) Lack of health education
10.5% (26) Alcohol and drug abuse	2.0% (5) Crime and violence
10.5% (26) Unemployment	4.8% (12) Other issue (high taxes; others?)

**7. Have you or anyone in your family had difficulty getting health care services you need in the past year?**

80.1% No  
 19.9% Yes, for the following reasons

10.9% Couldn't afford the services (29)	1.9% Waiting time was too long (5)
7.2% No health insurance (19)	1.9% Misunderstanding with staff (5)
4.9% Didn't know where to go (13)	1.1% Office was not open (3)
4.9% No way to get there (13)	0.4% Language/cultural barriers (1)
	1.1% Other (3)

**8. What, if any, health-related programs or services in this community have been important to you and your family?**

NCHHA/VNA/Home health/HCPC (20)

Senior services/Senior Center/Senior Wheels/Meals on Wheels (15)

"Hospital"/LRH/Oncology at LRH (13)

ACHS/sliding fee; vouchers; Partners in Health (12)

WIC (11)

WMMH/Mental Health (11)

"Good Doctors"; dermatology, FP/GPs, ENT, Peds (9)  
the local physicians have a good system of coverage so an on-call MD is available if needed

Dental care (4)

VA Services (4)

Healthy Kids (3)  
Medicaid

Ambulance Squad (3)

Low income health programs  
Received medication through the doctor with special programs  
affordable exams and assistance with medications  
Sliding fee programs at physician office

Hospice (2)

Dartmouth-Hitchcock (2)

Cancer assistance

Social Support involvement

health insurance

Cottage Hospital-flu shot

That I can get the service bus to get to see the doc

Grocery store, Walmart

Town clinic

Blood Pressure Clinics (2)

Lin-Wood Medical Center (2)

Health insurance through employment

Public Library

Diabetic care

Care-A-Van

Grafton County Nursing Home; "Nursing Home" (2)

Bus to Hanover for radiation

Diabetes Education; Molly Noonan (2)

Birth centers

Cancer treatment

Alzheimer's Partnership

Lifeline of VT

Peace and quiet, few people, no noise

**9. What program or services would you and your family use if they were more available?  
(Please check all that apply).**

27.9% Services for senior citizens (74)	9.4% Diabetes support program (25)
27.5% Public transportation (73)	9.1% Job training (24)
20.8% Recreational programs (55)	8.3% Healthy heart program (22)
20.4% Fitness/exercise programs (54)	8.3% Adult Day Care (22)
20.4% Farmer's market (54)	7.5% Parent support services (20)
20.4% Dental Services (54)	6.8% Child Day Care (18)
17.0% Programs for youth (45)	6.0% Community Gardening (16)
12.1% Medical services (32)	5.7% Mental Health Services (15)
10.9% Stop smoking program (29)	3.4% Substance abuse treatment (9)
9.8% Nutrition/cooking program (26)	3.0% Other service (8)

**10. Finally, if you had the ability to change any one thing that you believe would contribute to improved health of our community, what would you change?**

**Health Care Affordability/Insurance**

affordable health/dental insurance (6)  
affordable health care (3)  
Affordable medications/help paying for medications (4)  
Health care for those who fall into the gap between poverty and ability to afford health insurance (4)  
more affordable health care/medical services  
More alternative therapies covered by insurance  
affordable "alternative" health services  
Affordable medication for the elderly  
Lower Medical Costs for Seniors

**Health Care Availability**

More available healthcare/health facilities (4)  
Health services/dental services (2)  
“Local doctor” (2)  
Closer facilities  
move hospital back into town!  
Better medical services  
Greater availability/variety of specialists  
More Family practitioners  
We need a better mental health system- lower fees and waiting time, more trained professionals  
Need radiation oncology in this area.  
family planning center  
This area needs family doctors who see their own patients and know their own patients. There are none.  
A larger network/referral for specialists, consolidate all programs to one area  
Better knowledge and management of health care and patient communication within a comfortable environment.

**Prevention programs**

More preventive programs/clinics (well child, diabetes, blood pressure, cholesterol) (4)  
Mental Health education  
Health education programs (2)  
Counseling programs  
Teen pregnancy  
parent support program  
Provide more services for families  
more community functions involving family

**Stop Smoking**

no smoking/no smoking in public facilities (7)  
No more smoking, drinking, drugs (2)

**Transportation**

transportation to health facilities (3)  
Public transportation/bus service (6)

**Recreation/Fitness**

Recreation/fitness programs (2)

Affordable Recreation/fitness programs (2)  
community exercise/wellness program (2)  
Build a YMCA  
Exercise, nutrition  
exercise program at home

### **Youth Programs**

programs for youth (7)  
Programs for youth and seniors (2)

### **Senior Programs/Issues**

Increase opportunities for isolated elders to engage with others  
More advantages for senior citizens  
help shopping, getting mail and drugs, housekeeping  
Services to seniors  
Senior housing  
Assisted living (3)  
More visiting nurses (2)  
Someone to call or check on elderly when family is at work

### **Town Issues**

Town, cops, stores,  
the way the town is run; there is no communication with the town people  
Parking spaces in Main St. area should be more convenient  
Pave the side roads  
The server's attitudes, lower rent/ food prices  
Safe, level sidewalks everywhere in town for better walking  
Some don't want anything brought into town unless it benefits a few select people.  
By doing this it has nearly ruined the town. There is more to say but I won't.

### **Clean Air**

Stop Air pollution/trash burning/stop the dump (6)  
Closing mill-too much pollution as it is

### **Other Ideas/priority areas**

Lower taxes (3)  
Low taxes for seniors

Better paying jobs/job opportunities (2)  
Better paying jobs even for handicapped and senior citizens

The school lunch programs  
Nutrition information  
Bigger farmer's market, and run it until October

Availability of alcohol/drugs  
Get rid of all the drug addicts

decrease stigma associated with mental illness  
More public awareness about mental illness  
That people would be more broad-minded when it comes to mental and physical health

More federal funding  
Social support services  
More knowledge of food banks and etc.

Appointment/waiting time delays (2)

Poverty

Child abuse/domestic violence

Short winter days (lack of sunlight)

Better education

The whole law system because it causes people stress around here

Reduce stress levels, mental health