

**COMMUNITY BENEFITS PLAN -- REPORTING FORM**

*Pursuant to RSA 7:32-c-1*

FOR FISCAL YEAR BEGINNING 10/1/2007

to be filed with:

**Office of the Attorney General  
Charitable Trusts Unit  
33 Capitol Street, Concord, NH 03301-6397  
603-271-3591  
www.nh.gov/nhdoj/charitable**

Concord Regional Visiting Nurse Association, Inc. 020222122  
**Organization Name** **Federal Tax Identification #**

PO Box 1797  
250 Pleasant Street, Concord NH 03302-1797 1927  
**Street Address** **State Registration #**

**Has the organization filed its Community Benefits Plan Initial Filing Information form?**

Yes  No

**If No, please complete and attach the Initial Filing Information form.**

**If Yes, has any of the initial filing information changed since the date of submission?**

Yes No

**If Yes, please attach the updated information.**

**Section 1—Community Benefits Contact Person:**

- Name and Title: Mary B. DeVeau, President/CEO
- Address: Concord Regional Visiting Nurse Association  
250 Pleasant Street, P.O. Box 1797, Concord, NH 03302-1797
- Telephone: 603-224-4093

**Section 2 – Mission Statement**

**Statutory Reference: RSA 7:32-e I.**

**The health care charitable trust must provide its most recent mission statement and the date it was adopted. The mission statement must describe the purpose of the health care charitable trust and delineate how the mission statement related to the community benefits reported. The mission statement must be reaffirmed on an annual basis.**

**1. What is your mission statement?**

We provide and facilitate comprehensive care in the home and community to optimize health, well-being and independence.

**2. When was it last reaffirmed? (Mission statement must be reaffirmed by the trust annually).**

February 2007

**Section 3 – Miscellaneous**

**Is this plan available on your web site?** Yes  No

A summary of the FY 2007 Report is on our web site [www.crvna.org](http://www.crvna.org)

**If yes, may we include a link to the plan on the CTU web site?**

Yes

**Please check here if you are an area agency that reports to the Department of Health and Human Services.**

**Please check here if this report is filed for two or more healthcare charitable trusts.**

**Section 4 – Definition of Community and Population Served (RSA 7:32-d, II)**

**What community do you serve? (The community may be defined in terms of geographic boundaries, special populations, community groups, demographic characteristics, health status, health resources, healthcare utilization data, etc.)**

Concord Regional Visiting Nurse Association serves the majority of the communities of Merrimack County and parts of Hillsborough County. The communities that are not served by CRVNA are served by other visiting nurse associations. The area served by CRVNA coincides with the geographic area served by Concord Hospital. The growth of the service area has been the direct response to changing needs in communities in central New Hampshire, particularly as the communities have increased in population. As a not-for-profit, community-based organization, CRVNA does not discriminate in services and access to treatment, appropriate care, or employment in its programs or activities on the basis of race, color, national origin, religion, disability, age, sex, marital status, sexual orientation, source of payment, or the presence or absence of advance directives.

The Association was organized by community volunteers in 1899 to serve the residents of Concord. The geographic area served by the agency has steadily grown since 1899 as improvements in transportation have made it possible for CRVNA staff to travel greater distances to provide services. By 1974 the agency was providing services to residents of 10 communities and the name of the agency was changed to Concord Regional Visiting Nurse Association. Since that time the number of communities served has increased and the demand for services within the communities has also increased. With people living longer there is a greater number of frail elders with chronic health problems struggling to remain independent in their own homes. Family structure has changed steadily over the past 50 years and many elders are without family supports to help them deal with their aging related needs. More people are calling upon community resources to provide support and care.

Towns served by Concord Regional Visiting Nurse Association include:

Allenstown	Hillsboro
Antrim	Hooksett
Barnstead	Hopkinton
Boscawen	Loudon
Bow	Manchester
Bradford	Northwood (portions)
Canterbury	Pembroke
Chichester	Penacook
Concord	Pittsfield
Contoocook	Suncook
Deerfield	Warner
Deering	Washington
Dunbarton	Weare
Epsom	Webster
Henniker	Windsor

CRVNA is at times called upon to provide service to the residents of the New Hampshire towns of Belmont and Goffstown. Although these towns are not identified as being a part of the CRVNA service area, there are times when CRVNA is the only provider with the clinical expertise required, or times when the location is rural and remote to a point that no other provider is available.

The description of the methodology used in determining the communities served by CRVNA is attached.

#### **Section 5 – Community Needs Assessment Information (RSA 7:32-f)**

**1. Did you conduct your own community needs assessment or did you conduct the needs assessment in conjunction with other healthcare charitable trusts in your community?**

Concord Regional Visiting Nurse Association took part in the 2003 Capital Region Health Needs Assessment, conducted in the spring and summer of 2003. Other participating organizations included: Concord Hospital, Community Provider Network of Central NH, Dartmouth-Hitchcock Concord, and Riverbend Community Mental Health.

Concord Regional Visiting Nurse Association also conducts ongoing surveys of clients to assess how well specific CRVNA programs are meeting the needs in the community. This process continues and the information is used for planning program additions, expansions and changes.

A copy of the Executive Summary of the 2003 Capital Region Health Needs Assessment is attached.

**2. *If you conducted your own assessment, please answer the following questions:***

- a. When was the assessment last conducted/updated? (Following the development of the initial Community Needs Assessment, the assessment must be updated every three years.)**
- b. Describe how community input was solicited and used in conducting the community needs assessment. (The needs assessment process shall include consultation with members of the public, community organizations, service providers, and local government officials in the trust's service area.)**
- c. If your assessment was conducted or updated this year, please attach a copy.**

3. If you conducted a needs assessment with other healthcare charitable trusts in your community, please answer the following questions:

a. Identify the healthcare charitable trust designated by the group to file the community needs assessment with the Charitable Trusts Unit.

Concord Hospital

b. When was the assessment last conducted/updated? (Following the development of the initial Community Needs Assessment, the assessment must be updated every three years.)

2003

4. If you are the trust designated by a group to file its community needs assessment with the Charitable Trusts Unit, please answer the following questions:

a. Describe how community input was solicited and used in conducting the community needs assessment. (The needs assessment process shall include consultation with members of the public, community organizations, service providers, and local government officials in the trust's service area.)

b. If the group's assessment was conducted or updated this year, please attach a copy.

#### Section 6 – Community Benefits Plan/Report (RSA 7:32-e, II-VI, RSA 7:32-I)

Describe in detail the cost of the community benefits planned by the health care charitable trust and the methodology for estimating the cost. The plan shall include an estimate of the cost of each activity expected to be undertaken or supported in the ensuing year and a report on the unreimbursed cost of each activity undertaken in the preceding year. For each quantifiable benefit, the trust should provide an economic valuation that identifies the unreimbursed cost to the trust of providing the benefit and the method of calculating that cost. Nonquantifiable benefits should be identified separately and described in narrative form.

**PLEASE NOTE: RSA 7:32-I allows healthcare charitable trusts to file community benefit plans individually or in combination with others. If you are filing a report on behalf of two or more entities, the following additional requirements must be met:**

- The collaborating entities must choose a single date that is identified as the fiscal year beginning date for the plan. Please specify the date so selected.
- Please copy and complete page 1 (Section 1-3) of this form for each member of the group
- Please answer Section 6, question 2 through 8, for each member of the group.

The methodology used by CRVNA to estimate the cost of planned community benefits consisted of analysis of the hours spent by our staff in providing community benefits, based on recording systems of encounters and activities. This results in a valuation of the cost of providing services to our communities.

1. Please identify the health care needs that were considered in development of this plan.

- Seniors' access to health care
- Parenting skills
- Dental care for children
- Community education concerning end-of-life care and issues

If this report is filed on behalf of two or more healthcare charitable trusts, questions 2 through 8 in this section must be answered for each member of the group. Please use additional pages/space as necessary. This information may be identified within the plan itself or submitted as an addendum to the plan.

2. Please identify all activities the trust or group expects to undertake or support during the next year which address the needs determined through the community needs assessment. Please include the estimated cost of each activity.
3. Please identify additional community benefits or benefit activities, not specifically identified in the community needs assessment, the trust or group expects to undertake or support during the next year. Please include the estimated cost of each activity.
4. Please identify all charity care the trust or group expects to provide during the next year. Please include estimated cost of each activity.
5. Please identify all activities the trust or group undertook or supported during the past year which addressed the needs determined through the community needs assessment and the outcomes achieved. Please include the estimated cost of each activity.
6. Please identify additional community benefits or benefit activities, not specifically identified in the community needs assessment, the trust or group undertook or supported during the past year and the outcomes achieved. Please include the estimated cost of each activity.
7. Please identify all charity care the trust or group provided during the past year and the outcomes achieved. Please include the estimated cost of each activity.

NOTE: Bad debt may not be included as an element of charity care (RSA 7:32-h I.)

8. Please indicate the ratio of gross receipts from operations to net operating costs for the trust.

Gross receipts of \$15,847,054 divided by gross expenses of \$15,493,391 = 1.02%.

9. Please describe the means used to solicit the view of the community on the development of this plan and an evaluation of its effectiveness.

## INVENTORY AND VALUATION OF COMMUNITY BENEFITS FY 2007

<u>Activity</u>	<u>FY 2008 (est)</u>	<u>FY 2007</u>
<b><u>Charity Care</u></b>	\$679,470	\$617,700
Concord Regional Visiting Nurse Association did not deny needed skilled services because an individual was uninsured, underinsured, or unable to pay deductible charges required by third-party payment. The Association provided charity care to 146 individuals. The skilled care that these individuals received included nursing,		

therapy, and social work services, plus 81 hours of interpreter services.

The actual amount of charity care provided was \$282,511; this figure does not in any way reflect the free services provided through CRVNA Community Health Services. In addition, 1,454 individuals received Services that are not funded by any payor source. The value of those services was \$321,480. Charity care is funded by the earnings on the endowment, by town funds, and by donations.

**Telehealth Home Monitoring**

\$164,359

\$149,417

Telehealth home monitors were provided to 241 clients. Patients who receive telehealth actively participate in their own care by taking some of their vital sign measurements, answering disease-specific questions in their home. The information is transmitted to Concord Regional VNA via a telehealth monitor connected to an ordinary phone line and reviewed by a nurse every day. The telehealth program is individualized to the patient's chronic condition, allowing the patient to learn about his or her disease and how to prevent an exacerbation of the disease.

**Parent Friend Program**

\$145,278

\$132,071

The Parent Friend Program served 65 families in FY 2007. The Program is focused on maintaining family unity and improving parenting skills. There is no reimbursement for the services. CRVNA uses funds provided by United Way of Merrimack County and fundraising to support the program. The current cost to serve one family for a year is more than \$2,000.

**Baby's First Homecoming**

\$12,889

\$11,717

"Baby's First Homecoming" is a service offered by Concord Hospital to all mothers who give birth at Concord Hospital. CRVNA nurses make home visits following discharge from the hospital to monitor the well-being of mothers and their babies and to provide education on breast feeding and infant care. Home visits were made to 794 mothers and their newborns. Postpartum depression was identified in some mothers and reported to the attending physicians.

**Senior Health Clinics**

\$619,436

\$563,124

CRVNA uses funds provided by the United Way, towns, and fundraising to support Senior Health Clinics. In FY2007 \$12,375 in fees was collected. Space and utilities for the clinics are in-kind

donations. The cost per visit or encounter to CRVNA during FY2007 was \$35.52. CRVNA also staffed 17 blood pressure clinics, representing \$1158 and 39 hours in FY 2007.

**The Downtown Clinic**

\$15,542

\$14,129

Space and utilities are provided in-kind by St. Paul's Church for the Downtown Health Clinic. The costs incurred by CRVNA are for professional nursing, travel and general agency overhead. CRVNA uses some of its United Way funding toward the costs of this clinic. There were 336 encounters; the cost per encounter is \$42.00.

**Hospice House**

\$728,628

\$662,389

The Hospice House daily cost per patient was \$747.95. Revenue for the Hospice House covered \$412.84. The remainder of \$335.11 per day was subsidized by contributions and the community.

**Immunization Clinics**

\$24,904

\$22,640

Immunization Clinics provide prevention of communicable disease for infants, children, and adults of all ages. Convenient walk-in immunization clinics are held three times each month at CRVNA. Fees for immunizations are modest and vary according to the specific immunization. The \$5 fee for children is reduced or waived in situations of hardship. During the fall, daily clinics offer all segments of the community the opportunity to be immunized against flu and pneumonia. On-site clinics are offered to businesses when employers wish to provide preventive health care in the workplace. In the fiscal year 2007 (Fall 2006) flu season 4,471 flu shots were administered.

**Bereavement Support Groups**

\$9734

\$8849

Bereavement support groups provide loss and grief support to anyone in the community needing assistance to cope with the loss of a loved one. In FY2007, 58 individuals were helped through support groups.

**Head Lice Program**

\$781

\$ 710

Three head lice clinics were held at the Concord Boys & Girls Club, in which 349 children were screened for head lice.

<p><b><u>Volunteer Training/Volunteer Scheduling</u></b></p> <p>Volunteer training is offered to anyone in the community who wishes to learn how to serve clients through the programs of CRVNA. Twenty-seven individuals from Concord and surrounding towns were trained. In addition are the costs of the volunteer coordinator, who schedules and maintains communication with the volunteers.</p>	<p>\$28,058</p>	<p>\$25,507</p>
<p><b><u>Volunteer Hours</u></b></p> <p>Volunteers in Hospice Services, Community Health Services, Home Care, Community Education and Volunteer Trustees on the Board. More than 12,133 hours of service were recorded.</p>	<p>\$251,522</p>	<p>\$228,656</p>
<p><b><u>Clinical Education Experiences for Students</u></b></p> <p>Clinical education experiences for students are provided by CRVNA for students enrolled at the University of New Hampshire, Saint Anselm College and New Hampshire Technical Institute, as well as medical Residents in the NH-Dartmouth Family Practice Residency Program in Concord. CRVNA provided 2,734 hours of clinical training experiences for nursing/rehabilitation students and Approximately 480 hours of clinical education experiences for social work students.</p>	<p>\$137,407</p>	<p>\$124,915</p>
<p><b><u>Community Education Programs</u></b></p> <p>Community education programs are provided in a variety of settings in the towns served by CRVNA. More than 167 informational presentations or health fairs took place in FY2007, representing 201 hours.</p>	<p>\$9,712</p>	<p>\$8,829</p>
<p><b>Total valuation of services provided as a result of the generous support of funders, including individuals, businesses, foundations and government sources.</b></p>		
<p><b>TOTAL</b></p>		<p><b>\$2,570,653.00</b></p>

**Non-Quantifiable Benefits**

**Preventive Dental Clinic for Children**

The Dental Clinic for Children is a collaborative effort with Concord Hospital's Capital Region Family Health Center, New Hampshire Technical Institute, and area dentists and hygienists. The program is for children age 3 through 11 whose family income is below 185% of federal poverty guidelines. These are families that cannot afford the costs charged for these services at a private dental practice and families that cannot access a dentist who will accept Medicaid. The Dental Clinics provided preventive dental care for 83 children from Concord and adjacent towns at the March and August 2007 clinics. CRVNA acts as coordinator and scheduler.

**Restorative Dental Care for Children**

Restorative care was provided for children identified with decayed teeth at the Preventive Dental Clinic.

## **COMMUNITY BENEFIT REPORT ON FY 2007**

### **Charity Care**

Concord Regional Visiting Nurse Association did not deny needed skilled services because an individual was uninsured, underinsured, or unable to pay deductible charges required by third-party payment. The Association provided charity care to 146 individuals during FY 2007. The skilled care that these individuals received included nursing, therapy, and social work services. The actual amount of charity care provided was \$282,511; this figure does not in any way reflect the free services provided through Community Health Services. In addition, 1,454 individuals received services that are not funded by any payor source. The value of those services was \$321,480. The total charity care provided was \$603,991.

### **Telehealth Home Monitoring**

Patients who receive telehealth actively participate in their own care by taking some of their vital sign measurements, answering disease-specific questions in their home. The information is transmitted to Concord Regional VNA via a telehealth monitor connected to an ordinary phone line and reviewed by a nurse every day. The telehealth program is individualized to the patient's chronic condition, allowing the patient to learn about his or her disease and how to prevent an exacerbation of the disease. Telehealth home monitors were provided to 241 clients.

### **Parent Friend Program**

The CRVNA Parent Friend Program provides support and mentoring for parents who are struggling with the demands of providing care and a nurturing home environment for their infants and children. There is no fee to participate in the Parent Friend Program. Home Visitors are trained to work one-on-one with parents in their homes. Weekly home visits are planned to include instruction in the physical care of infants and children, child development, nutrition, smoking cessation, household management, budgeting, and goal setting. Reflective supervision is used to support and guide the Home Visitors in their work with each family. Parents are referred to CRVNA by physicians, social service agencies, schools, and CRVNA's "Baby's First Homecoming" nurses and are generally served for one year. Parent Friend mentoring encourages positive parenting choices that result in stronger healthier families, breaking the costly cycle of poor parenting.

Child rearing needs continued to be identified as necessary by residents, confirmed in the 2003 Capital Region Health Needs Assessment. The Parent Friend Program targets individuals who are at high risk of failure in the role of parenting. Low income, inadequate education, and single parenting are problems common to those who are served by CRVNA's Parent Friend Program. Most of these parents have been deprived of effective role modeling in their own lives, and many have been faced with the possibility of losing custody of their children.

The Parent Friend Program served 65 families with 106 children. Referrals came from CRVNA staff, the Capital Region Family Health Center, Riverbend Parent Child Centers, Concord Hospital's Center For Health Promotion, Lutheran Services, Partners in Health, and Camp Sebago. The average weekly home visit was for 2.5 hours. Smoking was an issue with many of the parents. More than 1,000 goals were achieved by the parents. CRVNA met regularly during the year with Child and Family Services to review referrals and avoid duplication of services. Comments were gathered from Parent Friend Program participants for their opinions of the support that they received and they were very positive.

### **“Baby’s First Homecoming”**

Home visits were made to 794 mothers and their newborns through “Baby’s First Homecoming” visits. These maternal/child health visits were made to 57% of the 1,394 mothers who delivered at Concord Hospital.

### **Senior Health Clinics**

CRVNA Senior Health Clinics promote health and independence among seniors of all ages through preventive health care services offered in convenient, accessible community locations. Services provided in these clinics include foot care, blood pressure monitoring, ear wax removal, injections, medication management support, immunizations, and other basic preventive support. The clinic nurse serves as a resource for matters related to their health, medications, and health insurance. Senior Health Clinic services are available at minimal cost to seniors and are offered at multiple Concord locations and in the surrounding communities. The locations include senior housing sites, community centers, churches, and the CRVNA offices. Senior Health Clinics are advertised to seniors through local newspapers and mailings. CRVNA also staffs monthly blood pressure clinics for the public.

Advances in medical technology and treatment mean that people are living longer, but with more chronic illnesses. As Medicare services have become increasingly more restricted and the cost of supplemental insurance policies becomes prohibitive, many seniors have had to seek affordable health maintenance opportunities. Many of these seniors are living on Social Security only, and struggle with steady increases in costs of medications and utilities. The State of New Hampshire has determined that long-term care for the elderly should be community based, with seniors living as independently as possible and in the manner that they choose. Housing options for the elderly in Merrimack County are increasing, while transportation solutions are not. Access and cost of healthcare services were identified among the top needs in the 2003 Capital Region Health Needs Assessment. Transportation continues to be a barrier for accessing health care in Merrimack County, especially among the elderly. CRVNA addresses both of these needs with the services of the Senior Health Clinics. CRVNA believes that by increasing the number of Senior Health Clinics, more seniors will have access to the effective, no-cost preventive health care services.

CRVNA Senior Health Clinics provided 1,777 reduced-fee visits for more than 444 seniors at monthly clinics in various locations. Services included screenings, foot care, ear wax removal, injections, blood pressure monitoring, medication education and nutrition counseling. Senior Health Clinic participants were surveyed once during the year. CRVNA also staffed 17 blood pressure clinics for the public, representing \$1158 and 39 hours.

### **The Downtown Health Clinic**

The CRVNA Downtown Health Clinic is a free clinic located in the Outreach Center of St. Paul’s Church in Concord to provide a convenient and compassionate place of care for all who are in need of help. The walk-in clinic is staffed by a CRVNA nurse who provides care for people of all ages. Referrals are made to CRVNA programs, appropriate health care providers, Outreach Services at St. Paul’s Church, and social service agencies.

Access to affordable healthcare services was identified as a principal need in the 2003 Capital Region Health Needs Assessment, and continues to be a problem in the community. The University of New Hampshire 2003 Health Insurance Survey reported that 13% of the state’s population under the age of 65 are uninsured, and 2% of children are uninsured. Even when people are employed, many do not make enough to pay the additional premium for family members to be insured. Increasing levels of deductibles and co-pays can result in people not seeking care from past providers. This need includes the cost of prescription drugs, health insurance and medical care. The Downtown Health Clinic addresses these needs in a caring and compassionate manner. Most of the people seen at the free clinic have issues of poverty, housing, transportation, mental health, and limited education. The Clinic strives to reach the needs of the homeless population, who are the most likely to fall through the cracks of a health system.

In 2007, the clinic provided 336 encounters to people ranging in age from young children to the elderly. Services included examinations, prescription assistance, and assisting people in finding a permanent

medical home. Referrals were made to the Capital Region Family Health Center, Concord Hospital, CRVNA services, and area physicians.

### **Hospice House**

The Hospice House is a 10-room residence that is open to all who are at the end stage of life, regardless of ability to pay the daily fee. The number of days of care that can be provided during a year is limited due to its size. The CRVNA Hospice House provides a safe, compassionate, and caring home for terminally ill individuals who can no longer be cared for in their homes. The Hospice House provides 24-hour nursing care in private rooms. No one is denied admission to the Hospice House because of inability to pay the daily fee for room and board. Each person who seeks admission to the Hospice House is advised of the daily fee and where needed, is evaluated for his or her ability to pay.

Family support, once the mainstay of care when someone was dying, has lessened as traditional family structure and stability have steadily changed. As the population of Merrimack County increases, the demand for the services of the Hospice House increases.

Concord Regional Visiting Nurse Association provided 2,805 days of care in the Hospice House. The actual number of patients served by the House was 268. The daily cost of operating the Hospice House exceeds the daily fee paid by the patients. This cost was \$662,389 and it is subsidized by the community through community dollars and donations. The Hospice House is evaluated by families of the individuals who have been cared for there and the responses have been overwhelmingly positive. Any constructive or negative criticism is considered in making improvements to the service provided.

### **Immunization Clinics**

Approximately 120 area adults and children received (non-flu) immunizations through CRVNA Immunization Clinics. In the fiscal year 2007 (Fall 2006) flu season 4,471 flu vaccines were administered.

### **Preventive Dental Clinics for Children**

Dental Clinics for Children are a collaborative effort with Concord Hospital's Capital Region Family Health Center, New Hampshire Technical Institute, and area dentists and hygienists. The program is for children age 3 through 11 whose family income is below 185% of federal poverty guidelines. These are families that cannot afford the costs charged for these services at a private dental practice and families that cannot access a dentist who will accept Medicaid. The Dental Clinics provided 83 preventive dental care visits.

### **Bereavement Support Groups**

Concord Regional Visiting Nurse Association served 58 people through bereavement support groups. CRVNA also made contacts with family members after the death of a hospice patient.

### **Head Lice Program**

CRVNA's "Heads Up" head lice education and prevention program received referrals from schools and other organizations. Several families were referred to CRVNA by school nurses when children were barred from school attendance because of chronic infestation with head lice. Head lice clinics were held at the Concord Boys & Girls Club, at which 349 children and staff were screened for head lice.

### **Volunteer Training/Volunteer Scheduling**

Twenty-seven individuals received extensive training to serve as Hospice Volunteers. In addition are the costs of the volunteer coordinator, who schedules and maintains communication with the volunteers.

### **Volunteer Hours**

Volunteers in Hospice Services, Community Health Services, Home Care, and Volunteer Trustees on the Board gave more than 12,133 hours of service.

### **Clinical Education Experiences**

Clinical education experiences for students are provided by CRVNA for students enrolled at the University of New Hampshire, Saint Anselm College, and New Hampshire Technical Institute. CRVNA provided

1,922 hours of clinical training experiences for nursing/rehabilitation students and approximately 400 hours of clinical education experiences for social work students.

### **Community Education**

CRVNA provided 167 educational sessions and health fairs at businesses, churches, civic clubs, schools, fraternal organizations, and senior centers in Concord and adjacent towns, representing 201 hours.

## **COMMUNITY BENEFIT PLAN for 2008**

Referrals will be taken from physicians, hospitals, and nursing homes. In addition, CRVNA is available to fire and police departments, as well as concerned citizens, to make home visits for purposes of assessing the status, safety, and well being of any elderly person about whom there may be concerns.

### **Charity Care**

Charity care is funded by the earnings on the endowment, by town funds, and by donations. CRVNA will continue to provide charity care in fiscal year 2008 in the amount of approximately \$679,470.

### **Telehealth Home Monitoring**

Patients who receive telehealth actively participate in their own care by taking some of their vital sign measurements, answering disease-specific questions in their home. The information is transmitted to Concord Regional VNA via a telehealth monitor connected to an ordinary phone line and reviewed by a nurse every day. The telehealth program is individualized to the patient's chronic condition, allowing the patient to learn about his or her disease and how to prevent an exacerbation of the disease. Telehealth home monitors will continue to be provided for appropriate clients.

### **Parent Friend Program**

The CRVNA Parent Friend Program provides support and mentoring for parents who are struggling with Concord Regional Visiting Nurse Association plans to serve approximately 60 families through the Parent Friend Program.

### **"Baby's First Homecoming"**

CRVNA plans to provide an increased number of Baby's First Homecoming visits in FY2007.

### **Senior Health Clinics**

CRVNA Senior Health Clinics promote health and independence among seniors of all ages through preventive health care services offered in convenient, accessible community locations. During fiscal year 2008, CRVNA Senior Health Clinics plans to provide 500 or so seniors with approximately 2,000 clinic visits. Services will be provided at minimal charge to seniors. All who are served will be surveyed for their level of satisfaction with the clinics. Monthly blood pressure clinics will also continue to be provided.

### **The Downtown Health Clinic**

The CRVNA Downtown Health Clinic is a free clinic located in the Outreach Center of St. Paul's Church in Concord to provide a convenient and compassionate place of care for all who are in need of help. The walk-in clinic is staffed by a CRVNA nurse and (once a month) a volunteer physician who provide care for people of all ages. The Clinic plans to provide \$15,542 worth of clinic visits.

### **CRVNA Hospice House**

The Hospice House is a 10-room residence that is open to all who are at the end stage of life, regardless of ability to pay the daily fee. CRVNA Hospice House plans to provide \$728,628 worth of care for terminally ill individuals at the Hospice House. CRVNA expects to waive or reduce the daily fee for 45 or so of these individuals. No one will be denied care on the basis of ability to pay for care at the Hospice House.

### **Immunization Clinics**

We expect to provide approximately 5,000 flu vaccinations. Other routine vaccinations will account for approximately 2,000 additional immunizations.

### **Preventive Dental Clinics for Children**

Dental Clinics for Children are a collaborative effort with Concord Hospital's Capital Region Family Health Center, New Hampshire Technical Institute, and area dentists and hygienists. Many dental homes have been found for the children who have used the clinics.

### **Bereavement Support Groups**

Concord Regional VNA expects to serve more than 50 people as the number of hospice clients increases. The number of contacts made after a death will correspondingly increase.

### **Head Lice Program**

CRVNA's "Heads Up" head lice education and prevention program receives referrals from schools and other organizations. Visits are made to homes and clinics are held at the Concord Boys & Girls Club. CRVNA plans to return to the Concord Boys & Girls Club to check and treat children for head lice.

### **Volunteer Training**

We expect to train an increased number of volunteers, particularly in hospice, as the number of clients served by hospice, grows.

### **Volunteer Hours**

Volunteer Hours includes the hours of volunteers in Hospice Services, Community Health Services, Home Care, and Volunteer Trustees on the Board. We expect to maintain or increase these hours in as we continue to strive to make use of volunteers when possible.

### **Clinical Education Experiences for Nursing Students**

Clinical education experiences for students are provided by CRVNA for students enrolled at the University of New Hampshire, Saint Anselm College, and New Hampshire Technical Institute. We plan to provide at least a 5% increase in clinical education, especially because of the current (and expected future) nursing shortage.

### **Community Education**

CRVNA provides educational sessions and health fairs at businesses, churches, civic clubs, schools, fraternal organizations, and senior centers in Concord and adjacent towns. CRVNA expects to provide approximately 300 community education hours.

**9. Please describe the means used to solicit the views of the community on the development of this plan and an evaluation of its effectiveness. (The report shall include the means used to solicit the views of the community served by the trust, identification of community groups, members of the public and local government officials consulted on the development of the plan, and an evaluation of the plan's effectiveness. The process for development of the plan shall include an opportunity for members of the public in the trust's service area to provide input into the development of the plan and comment on the trust's proposed plan.)**

Concord Regional Visiting Nurse Association has historically collaborated with the other providers of health and human services in Merrimack County as a member agency of the Community Provider Network of Central New Hampshire (CPNCNH), the United Way of Merrimack County and Capital Region Health Care Corporation. A close working relationship exists between CRVNA and Concord Hospital in an effort to provide a seamless continuum of care for all who are served. Concord Regional VNA participated in the 2003 Capital Region Health Needs Assessment, along with Concord Hospital, Riverbend Community Mental Health, the Community Provider Network, and other organizations.

CRVNA conducts ongoing community outreach efforts as well as ongoing client and family surveys. Parent Friend and Senior Health Clinic clients are surveyed twice a year, Immunization Clinic clients are surveyed once a year, and Hospice client families are surveyed twice a year.

### **Section 7 – Public Notice (RSA 7:32-g)**

#### **How is your plan/report made known and available to the public?**

The CRVNA plan/report is posted on our web site [www.crvna.org](http://www.crvna.org) and is linked to the web site of the Charitable Trusts Unit of the Office of the Attorney General. It is also disseminated at presentations to the Board of Trustees, in town annual reports, in a presentation to the District Council, and is given to members of the public upon request.

### **Section 8 - Additional Information**

*Section 8 is optional. However, responses will assist us in assessing the overall cost/benefit of implementing the community benefits reporting law and will assist the Legislature in future policy decisions.*

- 1. Did you or your group hire an outside firm to prepare your needs assessment?**
- 2. Did you or your group hire an outside firm to prepare your plan/report?**
- 3. What was the cost of the needs assessment in dollars and/or personnel hours?**
- 4. What was the cost of the plan/report in dollars and/or personnel hours?**
- 5. Did the services you deliver change in any way as a result of this assessment and reporting process? Please describe.**