

## **APPENDIX J**

## MEMORANDUM

**TO:** Greg Culley, MD  
Acting CEO – Indian Stream Health Center

**FROM:** Chris Dugan

**DATE:** January 24, 2021

**RE:** CHAN Survey Results

Dear Dr. Culley-

I am pleased to share results from our recently completed Community Health Needs Assessment (CHAN) Survey and key stakeholder interviews.

This report is divided into two sections. Part A will include the community survey and comments to set of 15 questions; part B is the narrative from a series of key stakeholder interviews conducted in November, December and January.

### **A. Community Survey**

- The survey ran from December 30, 2020 to January 22, 2021
- We received 43 responses
- Several sections included comments areas, all are included
- Some questions had multiple choice answers

#### ***Key takeaways included:***

- The survey provided comments sections throughout and there are trend lines regarding concerns about provider turnover and continuity. By far, this was the greatest area of concern.
- Conversely, there is strong affinity for front line and intake staff, high level of customer service and a caring environment of practice
- Comments included appreciation of "one-stop shopping" with co-located services at Indian Stream
- Comments included strong affinity for pharmacy services and access to drug discount programs

- Cost of care (high) and access to services (medical and otherwise) are also concerns

## **2020/2021 CHAN Survey – Indian Stream Health Center**

### **1. Where do you live?**

Coos County:	75%
Essex County, VT:	23%
Other:	2%

### **2. In the past two years, did you or a family member want or need any of these services? (# of respondents)**

Annual check-up in doctor's office	97% (41)
Cancer screening	31% (13)
Emergency room visit	45% (19)
Mental Health Counseling	31% (13)
Visit to local pharmacy for prescription	69% (29)

#### *Comments*

- Getting help from Sharon Belleville
- Dermatology visit
- Follow up to ER visit and appointment because of medical problem
- Referral

### **3. In the past two years, have you or a family member experienced difficulty in accessing any of the services listed above?**

Yes: 30% (13)

No: 70% (30)

#### *Comments*

- Won't see sick patients

**4. What is your age group?**

Under 18:	2% (1)
18-24:	2% (1)
25-34:	7% (3)
35-44:	12% (5)
45-54:	21% (9)
55-64:	33% (14)
65+	23% (10)

**5. What is the highest level of education you have completed?**

High School:	26% (11)
College:	55% (23)
Graduate School:	19% (8)

*Comments*

-Some college

-Currently enrolled in college for another degree

**6. What is your (yearly) household income?**

Under \$15,000:	2% (1)
\$15,000 - \$29,000:	12% (5)
\$30,00 - \$49,000:	17% (7)
\$50,000 - \$74,000:	33% (14)
\$75,000 - \$99,000:	17% (7)
\$100,000 - \$150,000:	17% (7)
\$150,000+:	2% (1)

- 7. To you and/or your family, please list the three most important factors for a healthy community in the comment box. (examples could be: access to primary care and services, cost/affordability, technology, access to specialty care, access to diagnostic services/lab/Xray, health education/prevention, access to healthy foods/exercise, transportation to medical appointments)**

*Comments*

- Primary care and services cost/affordability diagnostic services/lab/Xray
- A person answering the phone. Following up on my requests, labs, and test results Consistent doctor- not pa or np or temp dr.
- 1. Same day access to urgent care 2. Access to 24 emergency services 3. A provider with whom I have a relationship
- Access to local primary care that stays and cares about their patients. Not dealing with temporary providers who couldn't care if they ever saw you again. Diagnostic serves that are local -UCVH, not having to travel to Berlin, Weeks, etc.
- Access for pediatric care every day of the week. Access to emergency room care. Access to specialty services locally.
- Access to good quality primary care, consistent care, access to specialty care
- All the above plus seeing the same Dr., who's going to be there long term
- Easy access for acute illness care, access to specialists, affordable care
- Affordable access to primary, specialty and emergency services and affordable prescriptions.
- Access to primary care-affordability-compassion
- To be able to get a primary care visit in a timely manner. Transportation to long distance medical appointments. To be able to see the primary care provider you have been assigned instead of being floated around to different ones.
- Appointment availability. Keeping providers long term. Transportation
- A physician who will be available for the long-term. Hours for working people. Mental health services with flexible hours

- Primary care specialty service closer to home
- Cost, definitive care and exercise program
- Primary care that will see you. Access to diagnostic services, preventative care
- Same day appointments, exercise & transportation
- Access to same day care when sick. Most important. Changed PCP and location because of being put off for days.
- Access to primary care continuity. Access to specialty care. Access to mental health
- Convenient appointment times, access to specialty care, health education
- Affordable health care. Access to primary care
- Access to primary doctor, reliable doctor and one you can trust
- Preventative services and education, mental health services, affordable options for exercise (during the winter outside is often not feasible and the local gym is very expensive).
- Cost/affordability access to primary care access to diagnostic services/ lab/X-ray
- Caregiver availability Better communication between ISHC & UCVH
  - Healthy and nutritious food. LaPerles is too expensive. The food banks provide processed, salt laden, expired and freezer burned food.
- Access to all types of doctors, local to Colebrook.
- A doctor that actually stays with ISHC
- Access to a health care provider that wants to spend time with me and my health issues
- Scheduling appointments to accommodate time with provider. Provider that wants to hear your concerns.
- Quick appointments
- Cost of primary care visits, cost of medications. Availability for transportation for medical needs
- Dental care, medications, access to healthy food and exercise, Primary preventative health care

- Access to local health care with providers I know and trust and staffing who are friendly seeing the same friendly faces at registration and nursing helps remind me of the care me and my family are getting at ISHC. Cost is another big deal we are all on budgets and we have to watch our spending
- Your pharmacy is a big help to the community.
- Access to healthy foods/exercise cost/affordability access to specialty care
- Primary care with same doctor all the time
- Specialty care Diagnostic services for labs -X-ray-
- Access to exercise, access to primary care, access to diagnostics
- Access to Mental Health services. Access to primary care. Cost/affordability
- Being cared for by people I trust for both my family and I. Accessing both medical and behavioral health services in the same environment. Cost - ISHC helps so many, including myself. Even though my family makes sufficient money, we can't afford \$500 medications. Our only saving grace is the ISHC pharmacy. Otherwise, we would be choosing between needed prescriptions or paying our mortgage prescriptions or paying our mortgage.
- Costs, more education and knowledge of the surrounding resources
- Access to primary and diagnostic services. Cost. access to exercise
- Access to primary care. Access to emergency care. Access to diagnostic services
- Access means proximity also
- Xray

**8. To you and your family, please list the top three health challenges (barriers to care).**

- Financial. pharmacy cost. pharmacist - ease of use access to primary care provider
- Lack of Drs, Mismanagement of the local FQHC resulting in loss of all the providers Refusal of ISHC board to listen to its employees and past employees
- 1. Transportation 2. Lack of urgent care from sat noon to Mon a.m. 3. Constant turnover of primary care providers

- Having to book appointments weeks out when you need you be seen sooner.
- Stability of providers
- Lack of pediatric care every day of the work week. Co-pay costs associated with prescription refills. Available permanent primary care provider.
- Lack of providers, providers are locums, lack of providers
- Walk in and weekend appointment in a clinic,
- Access to specialists, timely appointments for acute and routine care, expensive and time-consuming travel
- Cost timely appointments Lack of services (i.e.-substance abuse, mental health)
- Appointments
- Having providers available at Indian Stream. In the last two years I have been assigned 4 providers who have stayed a short time and left. Getting timely appointments. One time I had a UTI and was put on a wait list for two days later for an appointment. I went to the ER and then received a letter sort of chastising me for it.
- Transport Available times, Communication
- Not having services available at convenient hours, A physician who will stay in the area
- Weight loss, lowering my cholesterol
- Distance to definitive care, Not comfortable that a transfer will occur, Lack of continuity of care
- Hours of operation. No Drs.
- Lack of same day appointments, lack of thorough follow through from primary care providers and lack of mental health services (long wait for appts etc.)
- Not enough medical personnel to cover all patients. Changes in personal, can't get close to PCP
- Continuity of care!!!! Specialty services, Cost
- Access to specialty care, inconvenient appointment times, cost
- Cost



- Care, reliability, knowledgeable
- Cost for healthy foods and access to exercise facilities, stigma around mental health care, lack of relationships with primary care physicians (due to providers leaving the area)
- Finding time to make an appointment after work
- Walking, Hearing, Driving distance
- After hours appointments, Saturday appointments needed. Time
- My family is fortunate we have no barriers to care because we use the pharmacy at ISHC which provides affordable Medications. We are also fortunate to continue to be employed. Many in our community are unemployed and without health insurance.
- No affordable Dental care No affordable eye care, No stable primary care provider
- Losing my trusted PCP Mary Judd to Weeks. We've seen her for a very long time, it's sad that she moved on.
- Insurance participation hours for service/availability lack of coverage for CAM services
- Different doctor every visit. Wait to see specialists. Long wait for mental health
- Access to specialists,
- Being able to schedule provider appointments at a time of day that fits into my schedule
- ER costs - just not affordable (or trustworthy, at UCVH). Prescription costs - again, the ISHC pharmacy allows us to take care of ourselves proactively instead of having to be reactive to issues that could have been prevented with early intervention.
- Lack of providers, lack of resources, affordability
- Access to services within <1 hour travel that my insurance is enrolled with. Limited selection of services/specialists within 2 hours that are enrolled with my insurance. High deductibles/copays
- Primary care

**9. For yourself, what are your personal TOP three health challenges?**

- Weight, exercise, making smart food choices
- Finding a specialist who will actually find out what the hell is wrong with my body because it's not a simple issue
- A fib, ra. Aging
- Having a provider I trust and cares about me. The rest of the workers are very caring with their patients, from nurses, down through registration.
- Cancer
- Permanent primary health care providers.
- Getting the same Dr, time after time,
- Expensive and time-consuming travel for care, lack of trust and confidence in local providers, timely appointments for care
- Family support for folks suffering from mental health and substance abuse issues; support for intervention and timely access to those services; timely access to specialty services
- None
- I have hypertension but it is under control. I also have high cholesterol which is under control. I'm told I am prediabetic (aren't we all) but my numbers are good.
- Communication, Maintaining a PCP, Pharmacy hours
- Services that are convenient, convenient times for blood work for working people
- Weight loss
- Neurological, Proper diet, Exercise
- Just had a major surgery in July and then my primary care Dr. left and I feel abandoned. No contact to get me set up for new provider.
- Time
- Diabetes, weight
- Available appointments for physicals, availability of primary care

- Exercise, eating healthy, sleeping well
- Accessibility
- Exercising and eating healthy
- Convincing myself to see a doctor for well visits. The last time I had a physical 3 years ago I was asked why I was there. I don't have anything wrong with me. I was not impressed by that!
- Walking, Hearing, Nutritionally balanced meals
- Weight, hair loss, thyroid
- Weight
- I am fortunate I have no health challenges. I am employed, I have health insurance and I use ISHC Pharmacy or my medications.
- Weight, Exercise, Access to healthy fresh food
- Weight, stress,
- Endocrine, reproductive, and weight
- Access to indoor exercise, access to healthy food,
- Receiving Mental Health follow-up. Eating better/exercising. Not having a women's health provider to follow up with birth control and routine screenings.
- Cost of meds. Trusting health care providers
- High blood pressure, high cholesterol, depression
- Cost, Availability locally, My own stubbornness
- Xray

**10. How would you rate the overall health of your community?**

Excellent: 0%

Good: 24% (10)

Average: 50% (20)

Poor: 29% (12)

*Comments*

- Continuity of care

**11. How would you rate your own personal health?**

Excellent: 7% (3)

Good: 56% (24)

Average: 33% (14)

Poor: 5% (2)

**12. How do you pay for your/your family's healthcare?**

Private insurance: 65% (28)

Medicare: 23% (10)

Medicaid: 9% (4)

Self-insured: 2% (1)

Self-pay: 12% (5)

Other: 7% (3)

*Comments*

-Supplement

-I have Federal Employee Blue Cross/Blue Shield. I am retired.

-Medicare supplement

-Marketplace

-Medicare 148\$, Medicare advantage 42\$ and dental 30\$ a month

-Very High Insurance Deductible so basically Self Pay

**13. Do you have a primary care provider (i.e., Doctor, Physician Assistant, Nurse Practitioner) that you see for routine health needs?**

Yes: 67% (26)

No: 33% (13)

*Comments*

-Used to be Mary Judd and/or Dr Sweeney. You can't seem to keep anyone that's wants to stay more than 3 months. Why is that?

-Reestablishing after losing two in 2020

- Need to get a new provider
- I just received a new one and saw them for my annual physical in December.
- Not anymore
- Keeps changing
- I did but they left area, need to get a new primary
- She left
- ISHC keeps changing. I have no doctor now.
- Not since Mary Judd left
- Not anymore
- Depends on who is at ISHC. I won't leave the organization and I trust in the providers that are chosen to care for patients in this community.

**14. When it comes to your primary care provider and the care and services you receive, please check all areas that are most important to you. Your additional comments are welcome in the comment section.**

Providers are skilled and caring	84% (36)
My provider's office staff is caring, competent and easy to work with	79 % (34)
My provider's office is a pleasant setting	56% (24)
Because my provider is in a medical home environment, I have quick access to other services	33% (14)
My provider's office has other services onsite, including behavioral health and a full-service pharmacy	35% (15)

### *Comments*

- My providers office answers the phone and gets back to me promptly
- I am still waiting to see if you will have a provider that will stay and hear how good they are from other people. I really don't want to travel to have excellent care.
- I personally don't receive regular services from this establishment, but whenever I have had to take any child in to see a Dr. they have been pleasant, helpful, and friendly
- Stability of the providers in a practice/clinic. Frequent turnover causes skepticism for the quality of the environment and ability to provide quality and consistent care.
- That the provider listens to me and not seems like they are in outer space somewhere.
- Mental Health
- Too many different providers
- Primary care physician that stays in the area
- Not sure
- ISHC is a one stop shop with friendly caring people, fair prices in the pharmacy and it's local and driving a distance in the winter can be a problem. Missing time from work traveling to access health care is a real hassle. We need the clinic to remain open as an FQHC for many years to come.
- My providers office is clean

**15. Thank you very much for your time in filling out this survey. Please feel free to list all and any additional suggestions in the comment section.**

- Please keep your providers from leaving
- Get an outside survey company to ask your employees what needs to be corrected and then do those things so you can get back to being our community health center
- Dr. Who want to stay here long term. It's really hard to develop a relationship with your staff because they come and go so much,

- Keeping providers happy at ISHC so they don't leave, hate to travel away.
- I would hope that Indian Stream is getting back on track in having providers available. The last two years have been very skip or miss on whether you have a provider that stays more than two months.
- I hope the time that I've taken to make out this survey helps
- We need other services here in the North Country. Ridiculous to go to Dartmouth for an endocrinologist.
- Let's always remember the importance of the face-to-face people who add to the pleasant experience of the patients not the pencil pushers behind the scenes who are making the big bucks.

## **B. Community Health Needs Assessment Indian Stream Health Center - Key Stakeholder Interviews**

HRSA requires FQHCs to submit a community needs assessment at least every three years. As part of that assessment, personal interviews with the community key stakeholders are strongly suggested.

Accordingly, the CEO and the Director of Community Liaison conducted 10 interviews during November, December 2020 and January 2021.

### **Interviewees:**

- **Wayne Frizzell**, Real Estate Agent
- **Terri Herr**, US Customs Agent, former school teacher
- **Karen Harrigan**, Newspaper Publisher and Editor- *Colebrook News and Sentinel*
- **Charlie Jordan** Newspaper Publisher and Editor – *Colebrook Chronicle*
- **Donna Jordan** Newspaper Editor-*Colebrook Chronicle*
- **Beth Bissonnette**, Pittsburg, NH Tax Collector
- **Hanna Campbell**, Colebrook, NH Chair of the Board, Chamber of Commerce
- **Jodi Gilbert** Executive Director Colebrook Chamber of Commerce
- **Don Noyes**, Owner Noyes Chevrolet
- **Scott Cooper**, Bangor Saving Bank

The interviews consisted of asking each interviewee a series of questions about health care services in Colebrook, Coos County and the Canaan area of Vermont.

Specifically: Where do you get your primary, or specialty health care? Have you ever been a patient at Indian Stream Health Center? At UCVH? At Weeks Medical Center? What have been your experiences at those facilities? What do you know, or what are you hearing about Indian Stream Health Center? About UCVH?

## **Results**

All, except, one of those interviewed, had been patients, in the past, or currently were patients at ISHC.

For the most part we heard high praise and gratitude from those interviewed, who were still ISHC patients. We were told numerous anecdotes of specific examples where ISHC's providers, nurses and care managers had a significant impact on the health of the person being interviewed, or their relatives.

The most common negative comments about Indian Stream were made regarding the turnover of providers and the changes in leadership. One interviewee gave us a strong statement about ISHC "firing" her personal physician, Dr. Fothergill, in 2017. One patient stated she had been a patient for many years, but when Dr. Avery left, she followed him to North Stratford.

One of the newspaper editors stressed to us, people in the North Country, want one personal physician, to whom they can relate and they have problems seeing ISHC as a provider-based team, which will give them quality medical care.

Most interviewed did not have experience with the Weeks office in North Stratford or Weeks specialists. Two, who had been Weeks patients, did mention the turnover of providers there.

Comments regarding UCVH, varied from positive experiences at the hospital, to extremely lengthy, negative monologues on the hospital's leadership and operations.

Most interviewed said the quality of care at the hospital was good. Several indicated it was basically a way-station for patients to be sent to higher levels of care. We heard several stories of the hospital saving their elderly parents' lives.

As mentioned above, most interviewed received their specialty care, not in Lancaster at Weeks, but in Littleton, at DHMC in Hanover, at UVM Medical Center, or in Boston.



## **Notable Quotations**

"I have been a patient at Indian Stream all my life and so has all my family. We have always been very satisfied with the care."

"The case managers and Sharon Belleville have been life savers to my elderly parents,"

"I was a patient at Indian Stream, until recently. I left because of having to constantly change my doctor."

"I don't know anyone on the Board of Indian Stream. Are they people from the community?"

Before the current Board leadership, I could always get detailed information on Indian Stream. Now I don't even get my calls returned."

Indian Stream needs to have a public relations campaign stressing the group nature of giving medical care."

"We have all been hearing about all the problems at Indian Stream for several years, but we're now hearing things are improving."

"The hospital just puts on band-aids"

"I think for what they do, the hospital gives pretty good care."

"The hospital saved my father's life, twice."

"We're hearing about a lot of problems between the hospital leaders and the employees."

"Why have so many nurses resigned from the hospital?"

"We don't know what to expect from the hospital, or what's coming next from them."

"The current management of the hospital and the CEO are not performing. The morale of the hospital employees is very poor. Many of us in the community are fed up with the hospital's problems and want to see a total change in management."