

NAUGATUCK VALLEY COMMUNITY HEALTH IMPROVEMENT PLAN

2022-2024




GRIFFIN HEALTH





Dear Valley Community,

We are pleased to present the 2022-2024 Community Health Improvement Plan (CHIP) for the Naugatuck Valley communities.

The CHIP is part of a regional initiative that supports regulatory and accreditation requirements of both Griffin Hospital and Naugatuck Valley Health District. The overall goal of this Community Health Improvement Plan is to address chronic conditions that affect the health of our community, and to help reduce disparities in the health and health care of various segments of the Valley population. The CHIP outlines key objectives and strategies that address determinants of health and improve health equity.

This roadmap for improved health results from the consistent dedication of numerous Valley partnerships, working together in a collaborative planning process. From November-December 2022, approximately 100 stakeholders from a wide range of community agencies and the public reviewed the top concerning public health issues identified in the latest community health needs assessment, the *2022 Valley Community Index*, which identified the following key health priorities for the Valley. We invite all residents of the Naugatuck Valley towns to learn about these planned actions to enhance community health.

- Mental Health
- Substance Use
- Equitable Access to Health Services

We would like to extend our thanks to our many committed partners who have contributed their ideas, energy and expertise to develop this Plan.

Together, we look forward to making a difference in the health of the Naugatuck Valley Region.

Yours in health,

Jessica Kristy, MPH
Director of Health
Naugatuck Valley Health District

Patrick A. Charmel
President & CEO
Griffin Health Services



Public Health
Prevent. Promote. Protect.



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ACKNOWLEDGEMENTS

This Community Health Improvement Plan (CHIP) is the result of the collaboration of individuals from many Naugatuck Valley health and social services organizations, and the community. A special thanks to the Valley Community Foundation, Griffin Health Services and Naugatuck Valley Health District, whose funding supported the 2022 Valley Community Index – a foundational document for this CHIP.

CHIP STEERING COMMITTEE

Carissa Caserta, Naugatuck Valley Health District
Beth Comerford, Yale-Griffin Prevention Research Center
Jessica Kristy, Naugatuck Valley Health District
Joan Lane, Naugatuck Valley Health District
Monica Oris, Griffin Health Services
Lisa Trupp, Naugatuck Valley Health District

MEMBER ORGANIZATIONS

Ansonia Public Schools
Ansonia Youth Service Bureau BHcare
BHcare
BHcare's Alliance for Prevention and Wellness
City of Ansonia
Community Members
Cornell Scott Hill Health Center
CT Dental Health Partnership
CT Community for Addiction Recovery (CCAR)
Derby Youth Service Bureau
Griffin Health Services
Housatonic Valley Health District
Literacy Volunteers of Greater New Haven
Naugatuck Valley Health District
Naugatuck Youth Services, Inc.
TEAM, Inc.
Valley Community Foundation
Yale-Griffin Prevention Research Center
Western CT Coalition





VISION

We strive to be a caring community that nurtures the overall health and quality of life of all its residents by promoting healthy living and equitable access to health services.

INTRODUCTION & BACKGROUND

A Community Health Improvement Plan, or CHIP, is part of an overall process intended to identify strategies to improve the health of a specific community or region. The process begins with a Community Health Needs Assessment, or CHNA. "Data obtained through the needs assessment is used to identify priority issues, develop, and implement strategies for action, and establish accountability to ensure measurable health improvement (National Association of County and City Health Officials). Simply stated, agencies work together to look at community health needs, select those issues of most concern, and establish a plan to address them. This process allows many community-based organizations, civic leaders, business owners and community members to understand the types of issues that surround them. It fosters improved coordination to identify and act on community strengths and weaknesses.

This 2022-2024 Community Health Improvement Plan (CHIP) for the Naugatuck Valley is the fourth such document* for our seven (7) Valley towns: Ansonia, Beacon Falls, Derby, Naugatuck, Oxford, Seymour, and Shelton. A key lesson learned from the 2016-2018 CHIP was to identify fewer priority issues so that adequate attention can be given and resources allocated to meaningfully impact them. Further insight drawn from the process of implementing the 2019-2021 CHIP was a concern to focus on achievable strategies with measurable outcomes. There is also an increased

emphasis on health disparities among different segments of our community, and on striving towards increased equity across all population segments.

This report relies on data from federal, state, and local government agencies, as well as information collected directly from Valley residents as part of the statewide 2021 DataHaven Community Wellbeing Survey. Eighty-nine local partners/community-members representing 42 different organizations/coalitions attended a community forum on November 15, 2022, for the rollout of the newest Valley Community Index. Based on the data presented, attendees prioritized 5 key health issues. This was followed on December 15, 2022 by a smaller but still broadly representative group which met and selected 3 health concerns as the focus for the 2022-2024 Valley Community Health Improvement Plan.

The Valley Community Index illustrates the connections among health and other quality of life issues, including economic, educational and cultural elements. The Community Health Improvement Plan incorporates these connections, and an acknowledgement of the critical role that social determinants play in the health of the community. The CHIP supports the efforts of the many health and service organizations that strive every day to address the societal inequities that contribute to health disparities within our Valley municipalities.

**For prior CHIPS, see www.nvhd.org or griffinhealth.org.*



KEY FINDINGS FROM THE NAUGATUCK VALLEY COMMUNITY HEALTH NEEDS ASSESSMENT

Social Determinants of Health

It is well known that the “conditions in which people are born, live, work, and age”¹ substantially influence health. These conditions are called **social determinants of health** and include education, socioeconomic status, neighborhood and physical environment, community factors, stress, and access to healthcare. Social determinants of health tend to disproportionately and adversely affect racial, ethnic, and other minority populations.² Therefore, it is important to consider these factors when evaluating the health of a community.

The Valley Community Index reported that the poverty rate in the Valley was slightly lower than the overall state of Connecticut in 2020: (7 percent versus 10 percent).³ Another important measure of economic status is the percentage of households that are considered “Asset Limited, Income Constrained, Employed” (ALICE), which represents households above the federal poverty level (FPL) but earning less than the amount required to meet their basic needs.⁴ In 2018, nearly 40% of Valley households were either below the FPL or below the ALICE threshold. These findings were reinforced in the 2021 DataHaven Community Wellbeing Survey, in which 31 percent of adults in the Valley said that they were just getting by or struggling financially.⁵

Differences in health outcomes that are linked to social or economic disadvantages are called **health disparities**.⁶ Examples of health disparities in the Valley include better self-reported health among wealthier residents compared to lower income residents, and racial disparities in fetal and infant mortality. Of adults with annual incomes of \$100,000 or more, 89% rate their health as “very good” or “excellent,” as compared to just 64% of those with annual incomes below \$30,000. Rates of fetal and infant mortality are dramatically higher for Blacks (9.5 per 1,000) as compared to Whites (3.1 per 1,000) in 2016-2018.⁷

The goal of the current CHIP is to address social determinants of health to reduce health disparities and move closer to achieving **health equity**, a condition in which all residents will have the same opportunities for good health and will not be disadvantaged because of their social or economic circumstances.⁸

¹Artiga, S. & Hinton, E. Kaiser Family Foundation. (2018). Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity. Retrieved from <https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>.

²Williams, D. R., & Jackson, P. B. (2005). Social sources of racial disparities in health. *Health Affairs*; 24(2). Retrieved from <https://www.healthaffairs.org/doi/-full/10.1377/hlthaff.24.2.325>.

³Alison Johnson, Mark Abraham, Kelly Davila, and Camille Seaberry. (2022). Understanding the Valley Region: 2022 Valley Community Index. Derby, CT: Valley Community Foundation and DataHaven.

⁴Valley United and United Way of Naugatuck and Beacon Falls (2018). 2016 Point-in-Time Data. Retrieved from <http://alice.ctunitedway.org/wp-content/uploads/2018/09/Valley-UW-2018-ALICE-Catchment-Page.pdf>

⁵Alison Johnson, Mark Abraham, Kelly Davila, and Camille Seaberry. (2022). Understanding the Valley Region: 2022 Valley Community Index. Derby, CT: Valley Community Foundation and DataHaven.

⁶“Disparities.” Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, 17 Aug. 2018, <https://www.cdc.gov/healthyyouth/disparities/index.htm>.

⁷Connecticut Department of Public Health. 2015 Fetal & Infant Mortality Data.

⁸<https://www.cdc.gov/nchhstp/socialdeterminants/definitions.html>



Health Indicators & Mortality Data

According to the most recent data available, the leading causes of premature death in the Valley, based on years of potential life lost (number of years before age 75), were accidents/injuries (overdose, poisoning, motor vehicle crash, firearm, homicide or suicide), cancers (lung, breast, pancreatic and colorectal), heart disease and stroke, COVID-19 and lung disease. It is important to note that the leading causes of premature death in the Valley are also higher than those for the state of CT overall, as illustrated below and on page 15 of the 2022 Valley Community Index.

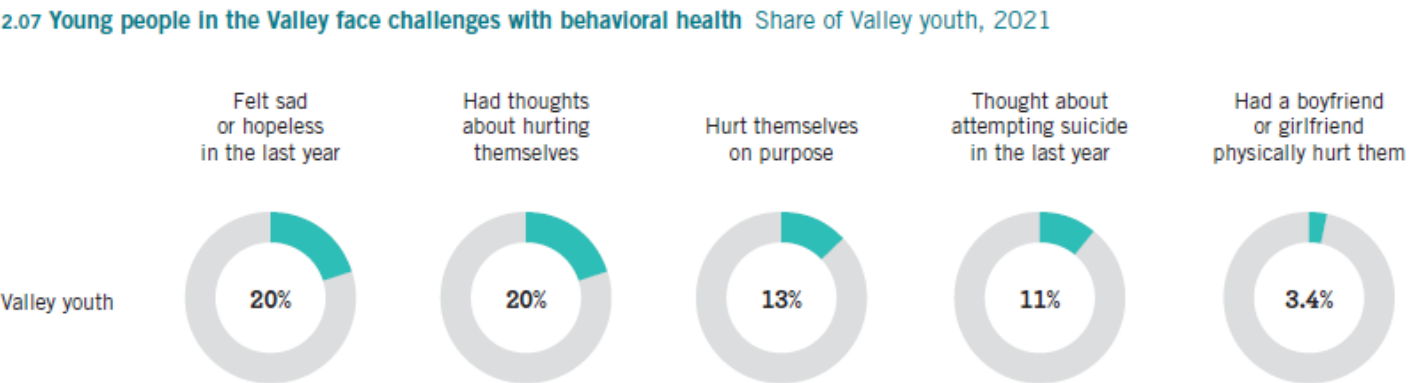
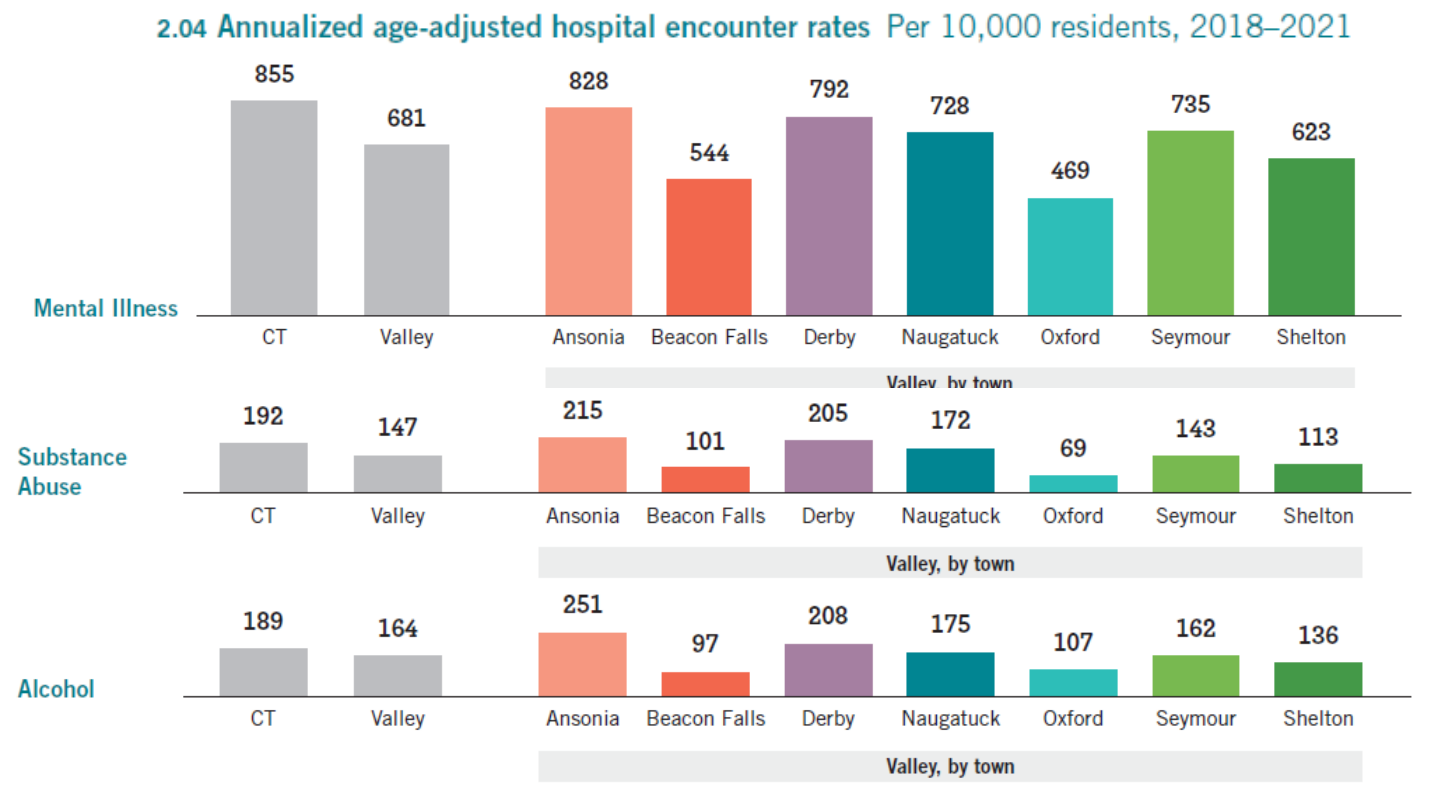
2.01 Annualized average years of potential life lost before age 75 Per 100,000 residents, 2015–2021

Cause	Connecticut	Valley
All causes	6,110	6,800
All accidents and injuries	2,461	2,771
Poisoning, incl. overdose	1,303	1,578
Motor vehicle crash	409	453
Firearm, incl. homicide and suicide	267	238
All cancers	1,532	1,637
Lung cancer	308	326
Pancreatic cancer	115	160
Breast cancer	131	135
Colorectal cancer	122	107
Heart disease and stroke	1,186	1,403
COVID-19	599	683
Lung disease	348	372



Mortality data only tell us about people who die; they do not provide a complete picture of the impact of chronic diseases on people’s quality of life throughout youth and middle age. Nor do mortality rates illuminate the disparity in the impact of these health issues on different segments of the population. Analyses of the records of residents’ visits to statewide hospitals and emergency rooms over the past six years and of the data collected through the DataHaven Community Wellbeing Survey present a clearer picture of the full burden of these conditions. The data also show disparities within the Valley when comparing each of the communities to each other, and to the statewide data, for different health indicators.

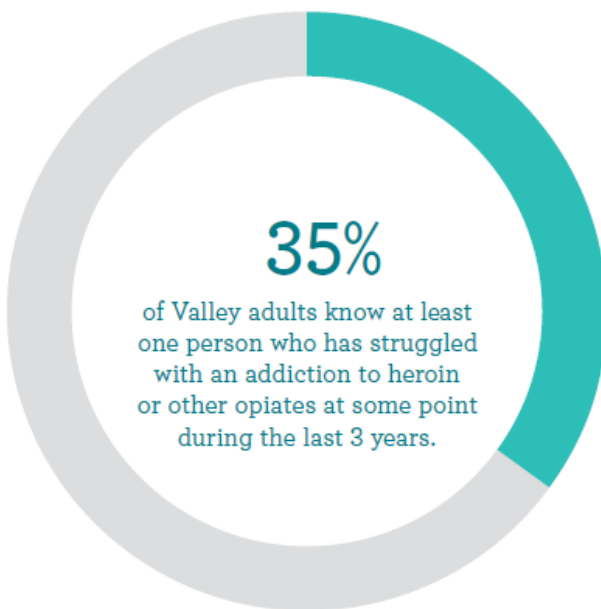
The following are extracts taken from page 20 and 26 of the 2022 Valley Index:





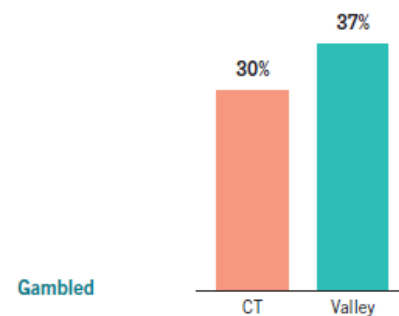
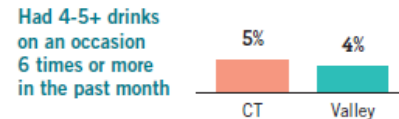
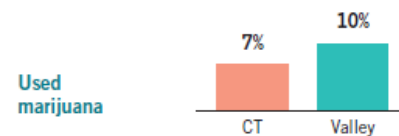
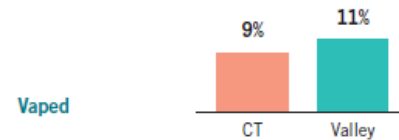
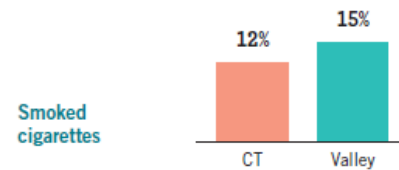
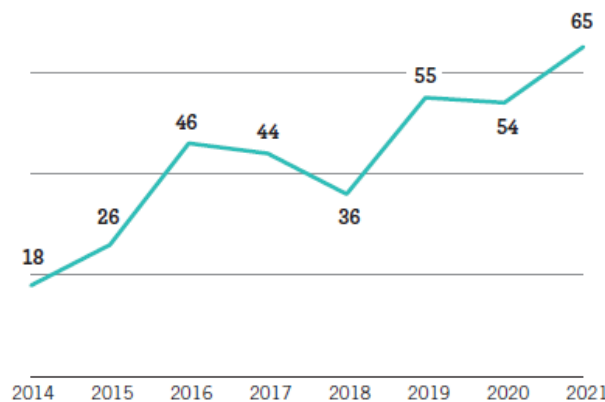
The Valley continues to experience high rates of substance use among residents. The opioid crisis persists in the Valley and although this is a statewide and national issue, the Valley continues to lose individuals due to fatal overdose and experience both high non-fatal overdose and substance use disorder rates. Opioids are not the only substance of concern; the Valley is committed to addressing the adverse impact of alcohol consumption and vaping, as well as the use of tobacco and cannabis.

2.08 Problematic substance use and gambling Share of Valley adults, 2021



- Of those,
- 3% said it included themselves
 - 52% said it included a family member
 - 38% said it included a close friend
 - 37% said it included an acquaintance

Meanwhile, the number of opioid deaths per year in the Valley has more than tripled since 2014.





Fourteen percent of adults are without a medical home, meaning they have no consistent doctor or health care provider that they rely upon. Furthermore, lower-income adults are twice as likely to have no medical home than middle-and-high-income adults.

The 2022 Valley Index further breaks down data related to barriers to healthcare among Valley residents in the table pictured to the right and on page 22 of the Index.

While these data excerpts are just small samples from our community health needs assessment, the data directly correlate with the anecdotal feedback that was heard during our listening sessions and December 2022 CHIP community workshop.

The full 2022 Valley Community Index can be found at www.ctdatahaven.org.

2.05 Barriers to healthcare Share of Valley adults, 2021

	No medical home	Delayed medical care	Didn't get medical care
Connecticut	11%	30%	11%
Valley	14%	32%	14%

By gender

Male	16%	27%	8%
Female	11%	36%	18%

By race/ethnicity

White	11%	32%	11%
Black	11%	24%	19%
Latino	34%	37%	21%

By income level

<\$30K	24%	44%	21%
\$30K–\$100K	12%	32%	14%
\$100K+	12%	27%	10%

By family type

Kids in home	18%	37%	12%
No kids	10%	29%	14%



DEVELOPMENT OF THE 2022-2024 VALLEY COMMUNITY HEALTH IMPROVEMENT PLAN

The CHIP Steering Committee met at least bimonthly through the Fall of 2022 to review the most recent CHNA and to determine what the newest priority areas would be. Underlying the Steering Committee's discussions was the need to meet both Griffin Hospital and Naugatuck Valley Health District's respective accreditation and regulatory requirements. Together, these include:

- The identification of at least two community health priorities (or, focus areas)
- Measurable objectives for each priority
- Strategies that are evidence-based, represent promising practices, or are innovative for each priority
- Each activity or strategy must include a timeframe **and** a designation of organizations or individuals that have accepted responsibility for implementing it
- At least two policy recommendations, including one aimed at alleviating causes of health inequities
- An emphasis on community engagement in the planning, implementation, and evaluation phases.
- Identification of the assets or resources that will be used to address the priority areas
- A process to track the status of the effort or results of the actions taken to implement CHIP strategies or activities

At the December 2022 community meeting, the top health issues along with supporting data from the CHNA were presented to the audience, which consisted of a mix of community members, partner organization representatives, and stakeholders. Additionally, any current initiatives or work being done to address the issues were highlighted. The group voted on the top three areas of focus for the 2022-2024 CHIP, taking into consideration not only the new data, but also a deep familiarity with existing collaborative efforts to address ongoing health concerns in the Valley.

The Focus Areas for the 2022-2024 CHIP are:

1. Mental Health
2. Substance Use and Misuse
3. Equitable Access to Health Services



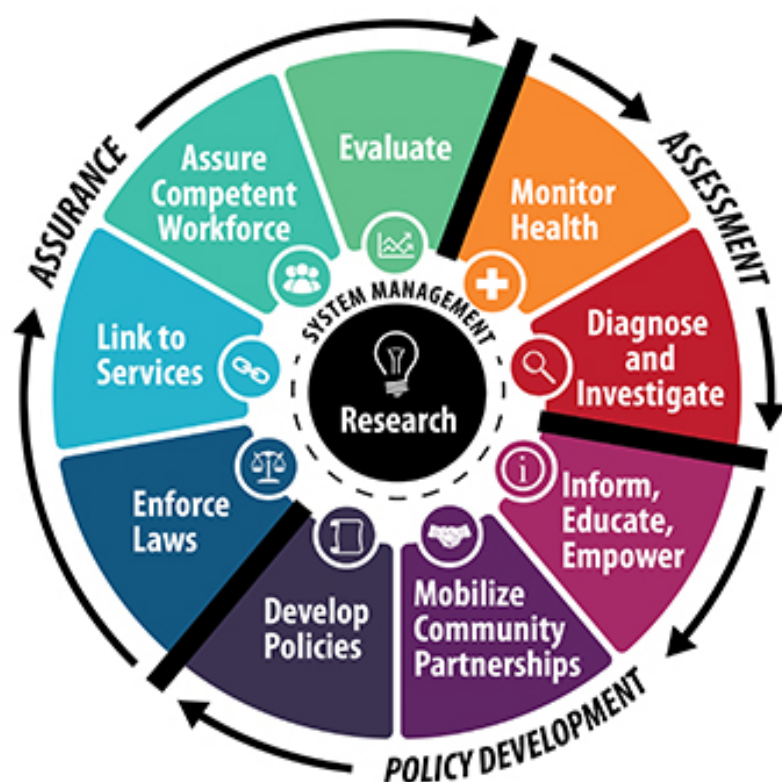
MAINTAINING ENGAGEMENT AND DISSEMINATION TO THE PUBLIC

The workgroup solicits input from the community throughout the duration of the CHIP. There are opportunities for the community to join various initiatives and activities under each priority area during the duration of the CHIP as well.

The 2022 Valley Community Index and the 2022-2024 Community Health Improvement Plan are available on both the Griffin Health Services and Naugatuck Valley Health District websites. Printed copies of these documents will be made available to the public (free of charge), as requested.

IMPLEMENTATION AND TRACKING PROGRESS

Each of the three CHIP Focus Areas is supported by a workgroup responsible for defining Goals, Objectives/Strategies, Activities/Actions and an implementation plan. A common tracking tool will be utilized, and each priority area working group submits quarterly updates to the CHIP Steering Committee. These reports will be presented to the respective Boards of Griffin Health and Naugatuck Valley Health District. Updated Workplans are appended to the CHIP document at least annually, and the Steering Committee hosts community updates on an annual basis.





Overview of the Implementation Plan

PRIORITY	GOAL	OBJECTIVE(S)	COLLABORATING COMMUNITY PARTNERS
MENTAL HEALTH	To review, vet and document mental health services available in the seven towns in the Naugatuck Valley and implement programs where gaps in support and care are found. This includes gaining full partnership and support of the leaders and appropriate officials in each town, evidenced by fostering full implementation of at least three mitigation solutions to challenges found during discovery and research phase.	<ul style="list-style-type: none"> • Increase access to mental health services in the seven towns within Naugatuck Valley. • Develop Naugatuck Valley mental health resource directory. • Increase training available for staff in both schools and youth-based organizations to provide youth with the tools to help identify mental health issues in themselves and others. Additionally, provide staff with appropriate interventions. • Develop measurement tools to track successful implementation. • Secure buy in from town leadership and appropriate officials. 	<ul style="list-style-type: none"> • Ansonia Public Schools • BHcare • Derby Youth Services • Griffin Health • Naugatuck Public Schools • Naugatuck Valley Health District staff /NVHD Board of Directors • UR Community Cares, Inc. • Valley Community Foundation/ VCF Board of Directors • Valley United Way
SUBSTANCE USE	To decrease substance misuse and deaths through evidence-based interventions and education focusing on opioids, alcohol use, and vaping cannabis and tobacco products.	<ul style="list-style-type: none"> • Inventory current working groups, coalitions, programs and/or initiatives that are currently addressing these areas. • Create a resource directory. • Complete Strategic Prevention Framework (SPF) training and apply framework to objectives. • Implement interventions and track progress. • Publish a quarterly data report during each fiscal year of the CHIP. 	<ul style="list-style-type: none"> • BHcare • BHcare's Alliance for Prevention and Wellness • Cornell Scott-Hill Health Center • CT Community for Addiction Recovery (CCAR) • Derby Youth Service Bureau • Griffin Hospital/Griffin Health • Housatonic Valley Health District • Naugatuck Valley Health District • Naugatuck Youth Services, Inc. • Western CT Coalition
EQUITABLE ACCESS TO HEALTH SERVICES	To gain a comprehensive understanding of access to health services that may or may not be equitable, and that impact the health and wellbeing of the community. Additionally, we want to identify and address barriers for each, and work with policy makers and community partners (agencies and residents) to create solutions to improve equitable access to health services.	<ul style="list-style-type: none"> • Create a detailed inventory of services and medical, dental, and behavioral health practices, with specific information. • Create and disseminate a guide of area health services to community members and a roadmap to provider groups in the Naugatuck Valley that will help improve equitable access. • Identify barriers to equitable access to health services. 	<ul style="list-style-type: none"> • City of Ansonia • Cornell Scott Hill Health Center • CT Dental Health Partnership • Griffin Health • Literacy Volunteers of Greater New Haven – Valley Program • Naugatuck Valley Health District • TEAM, Inc • Valley Community Foundation/ VCF Board of Directors • Yale-Griffin Prevention Research Center



PRIORITY AREA 1

MENTAL HEALTH

WHY IS THIS ISSUE A PRIORITY?

The Valley has seen a large increase in hospital encounter rates due to behavioral and depressive conditions. The increase may be related to economic vulnerability, social distancing, remote learning and unemployment related to COVID-19.

Depression is a risk factor or cause of many other health problems, including chronic pain, insomnia, and conditions that are exacerbated when patients have difficulty accessing medical care or taking medications as prescribed.

People of color are also slightly more likely to report feeling mostly or completely anxious and being bothered by feeling depressed or hopeless. Overall, 13 percent of Lower Naugatuck Valley adults reported that they feel mostly or completely anxious, and 11 percent reported being bothered by depression.

GOAL:

Increase access to mental health services in the seven Naugatuck Valley towns.

INDICATOR: Develop Naugatuck Valley Mental Health Resource Directory.

INDICATOR: Develop measurement tools to track successful implementation.

INDICATOR: Increase access to the Directory and implement at least one program for the community and staff.

Chair: Mark D. Goumas, MBA, MS, Valley Community Foundation

Co-Chair: Kayleigh Mihalko, Valley United Way

Recording Secretary: Lisa Trupp, CCHW, Naugatuck Valley Health District



PRIORITY AREA 1

MENTAL HEALTH *Continued*

OBJECTIVE	STRATEGY	ACTION STEPS	SHORT-TERM INDICATORS
Develop and deploy resource directory of mental health services of all types accessible to resident of the seven included towns.	Hire and utilize intern from the CT Department of Public Health (DPH) Fellowship program to conduct research, present resources and build directory.	Resource directory development process includes researching current programs accessible to residents in the seven towns, whether in person or virtual. Accessibility test must include means of access, location, cost or insurance applicability, criteria for entry (needs referral, etc.), wait time for entry. The resources should also be viewed using a multicultural lens, understanding the attitudes of different cultures around mental health concerns and care.	Naugatuck Valley Health and Social services guide complete by July 31, 2023.
Determine gaps in care based on research and propose mitigation solutions/programs to institute or add.	Research various age group resources and determine gaps. Partner with school districts to review mental and wellness programs in the schools and research resources in enhance programs.	The team will look to augment current support staff in both schools and youth-based organizations by reviewing, vetting, and choosing mental health trainings aimed at giving lay people who interact with youth the tools to recognize and help mitigate mental health challenges. Process will include selecting the best current programs offered in school districts and youth-based organizations and looking to implement them in additional districts.	Number of gaps in care identified by September 30, 2023. Number of new programs implemented as mitigation to gaps by September 30, 2023.
Acknowledging that seniors face a unique set of challenges, the mental health workgroup will identify and choose mitigation options that specifically support this age segments mental health and wellness.	Research senior specific mental health and wellness programs.	Track senior programs. Partner with agencies currently tasked with improving senior mental health and wellness to improve outreach in the Naugatuck Valley.	Number of programs identified as mitigation to gaps by September 30, 2023.
Secure buy in from leadership in all seven towns to provide access to and support and promote the resource directory. Towns should also agree to help implement and support any additional programs implemented to increase access to mental health care in the Valley.	Partner with agencies to distribute and use the resource guide.	Monitor access to resources directory to ensure each town has made the platform available and is actively promoting the resource.	Number of agencies actively using guide, as tracked through guide (website) usage and links by September 30, 2023.

*Reference Attachment: Mental Health Workplan



PRIORITY AREA 2

SUBSTANCE USE

WHY IS THIS ISSUE A PRIORITY?

Substance use, which may lead to substance use disorders, continues to impact Valley residents across different age groups. According to the 2022 Valley Community Index, overdoses remain one of the five causes of premature deaths from 2015-2021. The number of fatal overdoses caused by opioids in the Valley has more than tripled since 2014. Non-fatal overdoses are also a major concern in the Valley. Thirty-five percent of Valley adults know at least one person who has struggled with addiction to heroin or other opiates at some point within the last 3 years. Substance use/misuse behaviors are not limited to opioids, but also include higher rates of marijuana, vaping, and tobacco use when compared to the state data. The rates of alcohol intoxication or alcohol-related hospital encounters, particularly among teens and older adults, are concerning.

GOAL:

To decrease substance misuse and deaths through evidence-based interventions and education focusing on opioids, alcohol use, and vaping cannabis and tobacco products.

INDICATOR: Identify and implement evidence-based interventions along with evidence-informed assessments that will allow for more inclusive practices.

INDICATOR: Create a detailed resource directory of prevention and recovery services in the Naugatuck Valley.

INDICATOR: Develop standardized public data reporting related to substance use in the Naugatuck Valley.

Chair: Jessica Kristy, MPH, Naugatuck Valley Health District

Co-Chair: Susan Cutillo, LCSW, LADC, MBA, Griffin Hospital

Recording Secretary: Carissa Caserta, MPH, Naugatuck Valley Health District



PRIORITY AREA 2

SUBSTANCE USE *Continued*

OBJECTIVE	STRATEGY	ACTION STEPS	SHORT-TERM INDICATORS
Create inventory of current prevention and recovery services, and what gaps there are in our region.	Document behavioral health services available in the seven Valley Towns related to: substance use/misuse, recovery, and therapy for opioids, tobacco and cannabis, and alcohol. Include items such as: capacity for visits, hours of operation, languages, physical barriers and insurance barriers that may exist at these services. Services provided for individuals, groups, and for family/friends.	Create and publish resource guide.	Naugatuck Valley Health and Social services guide complete by July 31, 2023.
Document barriers that may exist to access these services in an equitable way.	Complete 2 community listening sessions and/or online or paper surveys to understand residents' and providers' challenges to access equitable health services, annually.	Plan and conduct listening sessions.	Complete 1 community listening session and/or online or paper survey to solicit community and provider input by July 15, 2023. Complete 1 community listening session and/or online or paper survey to solicit community and provider input by November 15, 2023.
Reduce youth access to alcohol and other illegal substances.	Reduce youth access to vaping products (including tobacco and cannabis) using evidence-based practices and environmental strategies. Reduce youth access to alcohol, prescription drugs, and cannabis by educating youth and adults while promoting secure storage and proper disposal of substances. Reduce youth access to and demand for cannabis by providing information to youth and adults about the harmful effects of cannabis use. Review current or proposed municipal zoning laws or relevant ordinances related to legal marijuana sales.	Educate the public on the health risks of vaping tobacco and cannabis products. Educate the public on risks and consequences of driving under the influence of alcohol. Educate the public on the risks of long-term negative effects of alcohol on the teenage brain, along with effects of alcohol on the athletes, through public outreach and reinforcement.	Compile laws and ordinances for the 7 municipalities by July 15, 2023. Recommend or advocate for revised or new policy that prohibits the use and/or sale of marijuana near schools and public parks by September 15, 2023. Create inventory of commercial retailers that sell tobacco and cannabis in the Valley to recommend potential zoning policy changes by November 15, 2023.



PRIORITY AREA 2

SUBSTANCE USE *Continued*

OBJECTIVE	STRATEGY	ACTION STEPS	SHORT-TERM INDICATORS
<p>Reduce substance use disorders in the region and promote a recovery community for those with substance use disorders in their families through education and awareness.</p>	<p>Increase awareness and education on opioids.</p> <p>Increase awareness and education on alcohol and substance use recovery programs.</p> <p>Increase access to naloxone/Narcan at the scene of suspected overdoses through the promotion and implementation of EMS Leave Behind Programs.</p>	<p>Educate the public on the health risks of opioid use using evidence-based or evidence-informed interventions.</p> <p>Conduct Academic Detailing site visits with prescribers/ providers/ pharmacists in the Valley (NVHD & APW).</p> <p>Promote Medication Assisted Recovery.</p> <p>Host tailored version of the evidence based LiveWell with Chronic Pain program to address the pathway from pain medication to opioid abuse.</p> <p>Identify possible local/ state/federal funding opportunities that may help support implementing Narcan Leave Behind Programs.</p> <p>Create a policy around “leave behind program” that can be adopted/adapted by different EMS providers.</p> <p>Educate the public about the risks and consequences associated with alcohol consumption.</p>	<p>Number of trainings held by December 2024.</p> <p>Number of Academic Detailing site visits completed by December 2024.</p> <p>Number of EMS agencies that implement a Leave Behind Program by November 15, 2023.</p>

*Reference Attachment: Substance Use Workplan



PRIORITY AREA 3

EQUITABLE ACCESS TO HEALTH SERVICES

WHY IS THIS ISSUE A PRIORITY?

Health equity is about creating a system in which all people have equitable access to the best health outcomes available. Structural barriers to health equity are realized not just in limited access to health care services, but also in limited access to nutritious food, safe and convenient transportation, and stable housing. Valley residents have a higher premature death rate than in CT as a whole. The prevalence of obesity, smoking and asthma, and the uninsured rate, are higher among certain racial groups and for lower income residents. Additionally, lower income adults are less likely than middle/high income adults to: 1) have a primary care provider; 2) receive early/adequate prenatal care; and 3) receive consistent dental care (Valley Community Index).

During community listening sessions, Valley residents shared their concern about lack of access to pediatricians, specialists, and dental care, along with the inability to get to medical appointments and full-service grocery stores due to lack of transportation.

These complex social needs contribute to reduced access to care, often resulting in unmanaged chronic conditions and more frequent ED visits.

GOAL:

To gain a comprehensive understanding of access to health services that may or may not be equitable, and that impact the health and wellbeing of the community.

- INDICATOR:** Improve equitable access to area health services in the Naugatuck Valley by creating and disseminating a resource guide throughout the community.
- INDICATOR:** Identify barriers to equitable access to health services.
- INDICATOR:** Create a detailed resource directory of services and medical practices in the Naugatuck Valley.

Chair: Elizabeth Laden, MPH, Griffin Health

Co-Chair: Monica Oris, RN, MHSA, CCM, Griffin Health

Recording Secretary: Joan Lane, MPH, Naugatuck Valley Health District



PRIORITY AREA 3

EQUITABLE ACCESS TO HEALTH SERVICES

Continued

OBJECTIVE	STRATEGY	ACTION STEPS	SHORT-TERM INDICATORS
Create inventory of current medical, dental, and behavioral health and other health-related services, and what gaps there are in our region.	Document health services available in the seven Valley Towns: medical, behavioral, social, and dental. If possible, assess utilization of these services using 211 tracking. Include items such as: capacity for visits, hours of operation, languages, physical barriers, and insurance barriers that may exist at these services.	<p>Create a comprehensive community resource guide that identifies health services in the seven valley towns while indicating service limitations.</p> <p>Identify stakeholders to contribute to the creation and maintenance of the resource guide long term.</p> <p>Educate the public on the health services resources guide through various channels such as websites, social media, public television, healthcare facilities, community centers, and local organizations.</p> <p>Measure the impact and effectiveness of the resource guide by monitoring usage and gathering feedback from the community.</p> <p>Establish partnerships to ensure that all members of the community, including providers and residents, are aware of needed services.</p>	Naugatuck Valley Health and Social services guide complete by July 31, 2023.
Document barriers that may exist to access these services in an equitable way.	Complete 2 community listening sessions and/or online or paper surveys to understand residents' and providers' challenges to access equitable health services, annually.	<p>Conduct listening sessions and create opportunities for open dialogue with community members regarding access to health services.</p> <p>Engage with community members, leaders, and providers to better understand their experiences and perspectives on accessing health services.</p> <p>Survey community members to share what barriers they face when choosing health services.</p> <p>Survey providers in our region to allow them to share barriers they face when providing equitable health services.</p> <p>Identify barriers as well as root causes of those barriers that our community members and providers face in order to provide health services in an equitable way.</p>	<p>Complete 1 community listening session and/or online or paper survey to solicit community and provider input by July 15, 2023.</p> <p>Complete 1 community listening session and/or online or paper survey to solicit community and provider input by November 15, 2023.</p>



PRIORITY AREA 3

EQUITABLE ACCESS TO HEALTH SERVICES

Continued

OBJECTIVE	STRATEGY	ACTION STEPS	SHORT-TERM INDICATORS
Develop a plan to address social needs that impact equitable access to health services in the Lower Naugatuck Valley.	Create a plan that will improve equitable access to health services that will include specific information from both provider and resident listening sessions/surveys. This Equitable Access to Health Services Roadmap, will be created and shared with provider groups as a best practice consideration such as: transportation, language, hours of operation, REL tracking at provider groups as well as insurance or physical space barriers.	<p>Review best practices, studies, and research papers related to healthcare disparities to identify relevant concepts.</p> <p>Locate specific geographic areas of concern or lack of access within the seven Valley towns.</p> <p>Develop a set of recommendations to address health disparities that are evidence based, feasible, and tailored to the specific needs and population.</p> <p>Involve community-based organizations, providers, and community residents in the development of recommendations.</p>	Complete Naugatuck Valley Health and Social services plan by March 15, 2024.
Work with state and municipal leaders to identify and advocate for opportunities that may support needed changes regarding access to health services in the Lower Naugatuck Valley.	<p>Develop summary of CHIP priority areas and inform state and local legislators of the barriers to equitable access to health services.</p> <p>Work with state representatives and local municipal leaders to see what local/ state/federal funding opportunities may help support necessary changes to current health services.</p>	Attend annual legislative breakfast in May and ensure information about this priority area is a topic at this event.	<p>Complete summary of CHIP for distribution by May 15, 2024.</p> <p>Complete a funding analysis by September 15, 2024.</p>

*Reference Attachment: Equitable Access to Health Services Workplan

Striving to be a caring community that nurtures the overall health and quality of life of all its residents by promoting healthy living and equitable access to health services.



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