



Institute for Health Policy and Practice

2021 Annual Report

Director's Note



We are so pleased to share our 2021 IHPP Annual Report. Thank you for taking the time to review this brief synopsis of another productive year. We had hoped that 2021 would bring us back to “normal,” but we now know that the future will never look like the past. We have learned from some very valuable lessons and are adapting and growing along the way. Our commitment to improving the health of the people of New Hampshire, the region, and the country continues, and our portfolio reflects that commitment. This report highlights a few examples from this past year but cannot be comprehensive. We are incredibly grateful to our partners and collaborators for what we have achieved. I am incredibly proud of this team’s commitment to the work and to each other, every day.

Jo Porter, MPH
Director

UNH established a [Land, Water, and Life Acknowledgment](#) as one of the many actions needed to build and sustain relationships with indigenous people.



UNH Land, Water, and Life Acknowledgment

As we all journey on the trail of life, we wish to acknowledge the spiritual and physical connection the Pennacook, Abenaki, and Wabanaki Peoples have maintained to N'dakinna (homeland) and the aki (land), nibi (water), lolakwikak (flora), and awaasak (fauna) which the University of New Hampshire community is honored to steward today. We also acknowledge the hardships they continue to endure after the loss of unceded homelands and champion the university's responsibility to foster relationships and opportunities that strengthen the well-being of the Indigenous People who carry forward the traditions of their ancestors.

Race and Equity Work

IHPP's Statement on Racial Equity

We held staff meetings dedicated to exploring race and equity in our work and culture.

Staff attended Race & Equity Trainings including:

- The Antiracism Journey: The Water We Swim In
- Culturally Effective Organizations

2021 Highlights

The Institute for Health Policy and Practice (IHPP) is an applied research institute located within the College of Health and Human Services at the University of New Hampshire.

IHPP conducts and disseminates high-quality, cutting-edge applied research and policy work that enables health system partners to implement evidence-based strategies to improve population health.

\$4,186,628

GRANTS & CONTRACTS

45

PROJECTS

23

FUNDING SOURCES

33

**CONFERENCES &
PRESENTATIONS**

32

PUBLICATIONS



IHPP Funders

Catholic Medical Center

Centers for Disease Control and
Prevention

Core Physicians LLC

Dartmouth Hitchcock Medical
Center

Extension for Community Health
Outcomes (ECHO)

Endowment for Health, Inc

HeadRest

MCD Public Health

National Association of Health Data
Organization

Network4Health

New Hampshire Charitable
Foundation

New Hampshire Children's Health
Foundation

New Hampshire Community
Behavioral Health Association

New Hampshire Department of

Health and Human Services

New Hampshire Department of
Justice

New Hampshire Telehealth Alliance

Patient-Centered Outcomes
Research Institute

Southern New Hampshire Area
Health Education Center, Lamprey
Inc.

Strafford County

University of Massachusetts

United States Department of
Agriculture

United States Department of Health
and Human Services, Substance
Abuse and Mental Health Services
Administration

United States Department of Health
and Human Services, Health
Resources and Services
Administration

IHPP Focal Areas and Leadership Team

Jo Porter, MPH

Director

Amy Costello, MPH

Director of Health Analytics and Informatics

Laura Davie, MA

Director of Long-Term Care and Aging

Lucy Hodder, JD

Director of Health Law and Policy

Jeanne Ryer, MSc, EdD

Director of Delivery System and Payment Reform





Institute for Health
Policy and Practice

Delivery System and Payment Reform

Selected Highlights



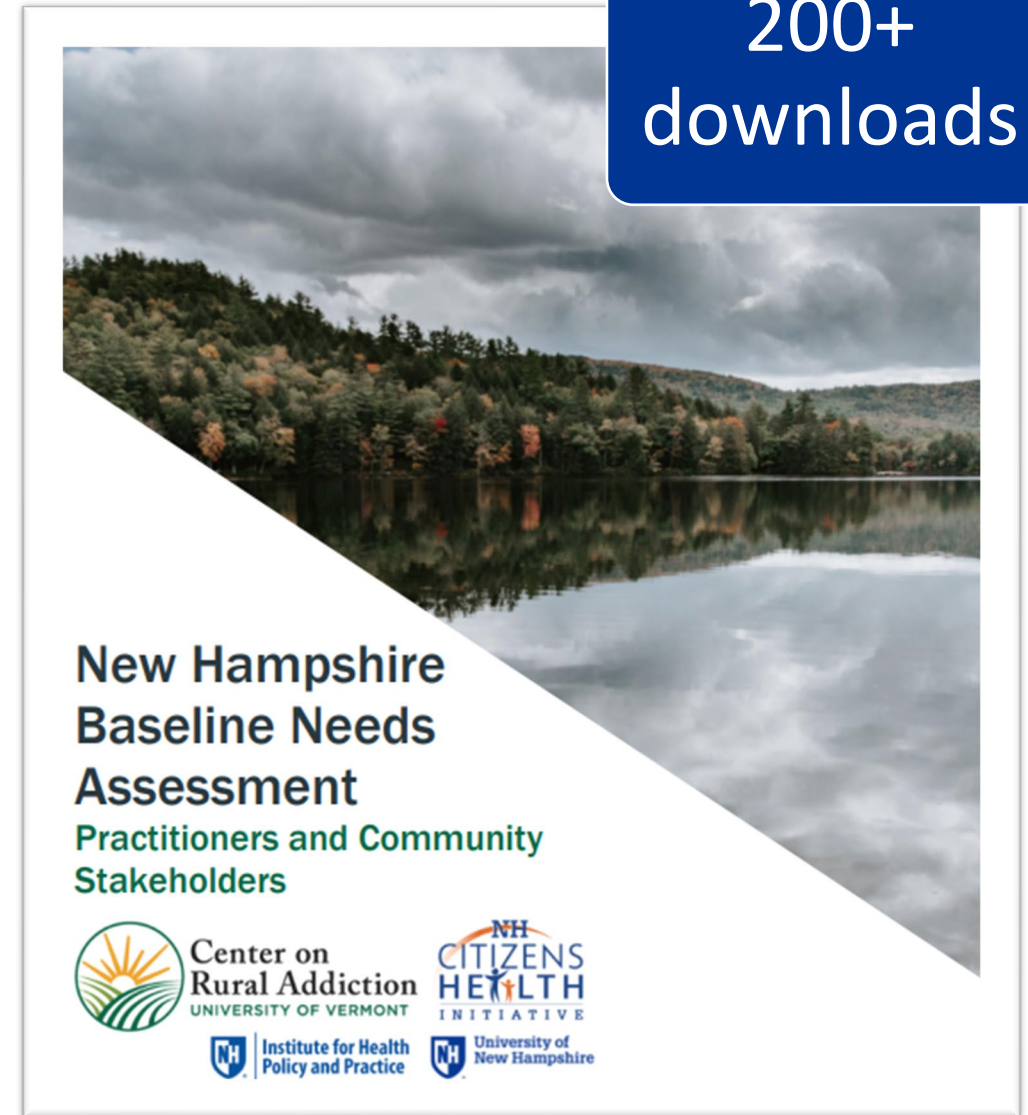
Center on Rural Addiction

NH CHI in partnership with the University of Vermont (UVM) and the Center on Rural Addiction (CORA) strives to evaluate and improve the care of persons with substance use disorder (SUD) in rural areas of NH, ME, VT, and northern NY by:

- Collecting, analyzing, and publishing results from the [NH Baseline Needs Assessment](#)
- Delivering **personalized technical assistance** (education and physical supplies) to rural practices and community organizations in NH
- Planning SUD ECHO for 2022 launch



200+
downloads

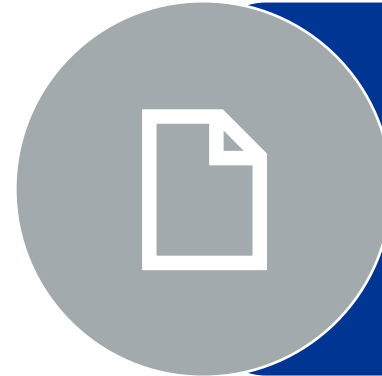


Delivery System and Payment Reform Focal Area

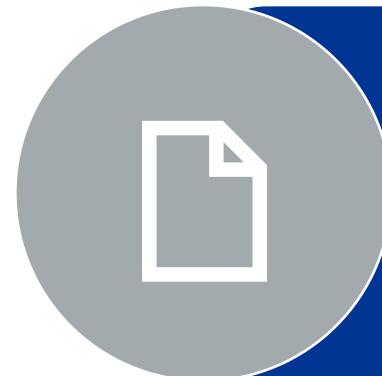
Trauma-Informed Care Practice Guide and Handbook



The NH Pediatric Improvement Partnership (NHPIP) released two new resources to support pediatric primary care practices in building family resilience and addressing adverse childhood experiences (ACE). Learnings captured in these reports were derived from a QI implementation project funded by The New Hampshire Children's Health Foundation. Five clinics from geographically diverse areas of NH were guided through a 15-month process to integrate ACEs screening into care delivery. Each clinic set up a project team that met monthly with a project coach, developed a screening workflow, received training and consultation, met with key community referral sources, and engaged in PDSA cycles to refine their process. Funding was renewed through 2024 to continue this important work.



A Guide to Trauma-informed Pediatric Primary Care provides a step-by-step process for clinics to develop and pilot a customized ACEs screening workflow, integrating principles of trauma-informed care.



Facilitating a Quality Improvement Approach to Childhood Adversity Screening in Primary Care: A Handbook provides a guide to replicating work done in five New Hampshire practices to screen and respond to ACEs and strengthen family relationships.



6 Project ECHO® Series Amplify Health Care, Connection and Resilience During COVID-19



Our learning communities experienced the “All teach, All learn” model through expanded topics on

- ARHQ Nursing Home & Continuation Series
- Partnership for Academic Clinical Telehealth - Medications for Addiction Treatment (PACT-MAT) Cohort 3
- Chronic Pain Self-Management
- Preceptor ECHO for Enhanced Rotations (PEER) Cohort 2
- Mental Health Care Access for Pediatrics (MCAP) Cohort 2
- Project ECHO: Aging, Community and Equity (PEACE) planning

Hub Team’s Novel Choices

- Interdisciplinary expert panelists & participants including community organizations & persons with lived experience
- National & regional participation -16 states represented
- Partnerships within the College: Nursing, Therapy, Cooperative Extension, Institute on Disability, IHPP
- External collaborations including ARHQ, Dartmouth-Hitchcock, John Snow Institute, Medical Care Development Global, Southern New Hampshire AHEC, North Country Health Consortium

Outcomes

- ✓ Increased participant knowledge & confidence
- ✓ Expanded professional & community connections
- ✓ Exposure to alternative perspectives & innovations
- ✓ Awareness of additional referral options
- ✓ Support among learning community promoted participant, expert panelists & hub team’s resilience during Covid-19

Delivery System and Payment Reform Focal Area

Partnering with UNH Extension to Address the Challenges of Chronic Pain in Rural NH



The **Chronic Pain Self-Management Project ECHO** Series established a telehealth learning community to equip rural health care and community professionals with **skills and strategies to assist individuals with self-management of chronic pain to reduce the risks of opioid misuse.**

The need for this series was established through a comprehensive assessment and planning study conducted by the New Hampshire Citizens Health Initiative at the University of New Hampshire (UNH) Institute for Health Policy and Practice.

The report speaks to the use of Project ECHO in working to assure a healthy NH making sure that all the state's residents can get the right care at the right place and right time.

6

1-hour long “all-teach all-learn” sessions

75%

75% Increased Confidence In referring individuals to formal Chronic Pain Self-Management Programs

33%

33% of subject matter experts were UNH faculty

71

71 Attendees; 69% of participants from rural regions

76%

76% Increased Confidence In assessing for risk of substance use disorder (SUD) for individuals with chronic pain using opioid treatment options



Delivery System and Payment Reform Focal Area

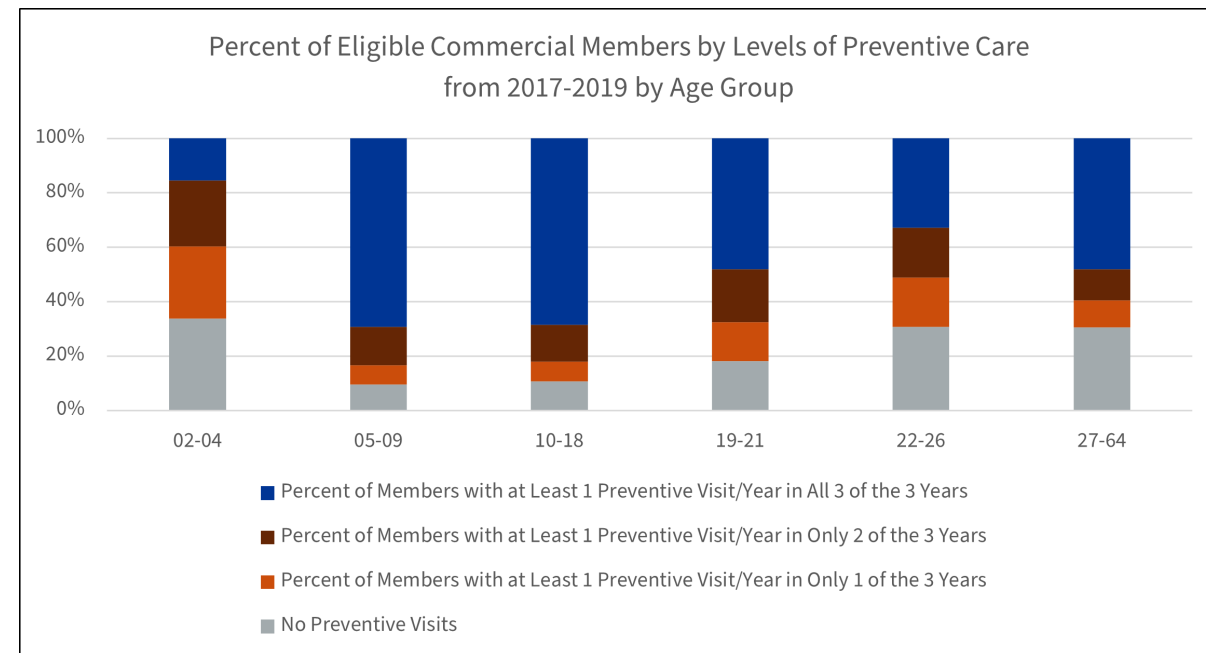
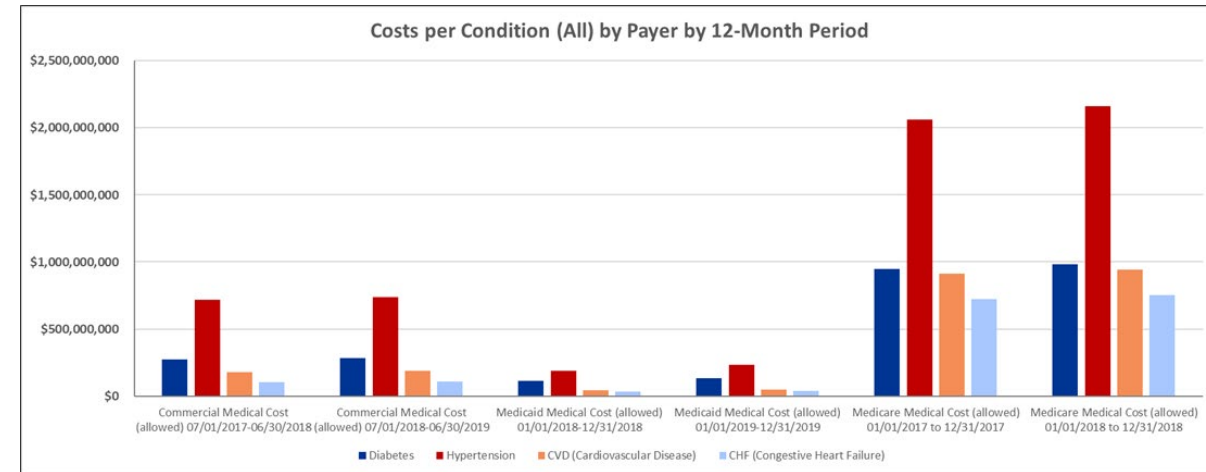
Health Analytics and Informatics

Selected Highlights



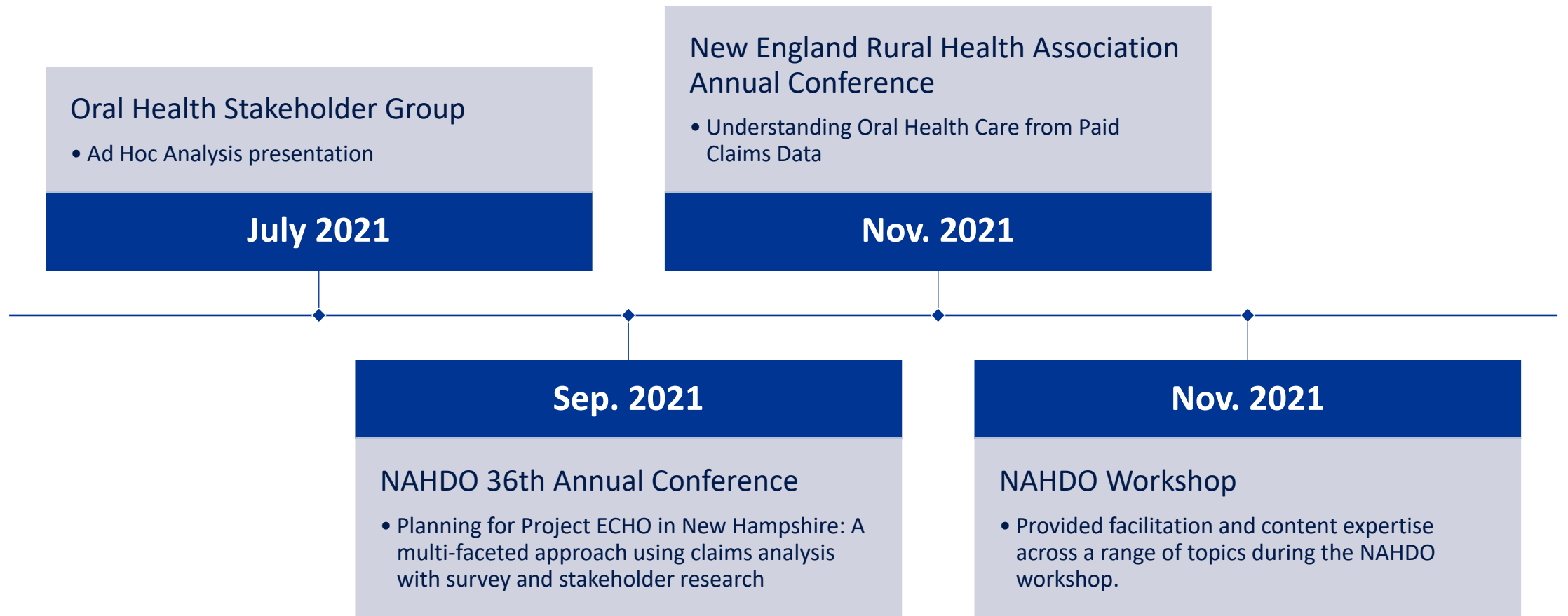
Publications and Reports

- Cost and Utilization of Treatment for Diabetes in NH: Analysis of Medical and Pharmacy All-Payer Claims Data | **March 2021**
- Analysis of Dental Claims to Understand Patterns of Oral Health Care Services in 2017-2019, Fluoridation, and Oral Health Care Patterns During the Covid-19 Pandemic | **August 2021**





Conferences & Presentations



Other Works



- Medicaid Health Information Technology (HIT) Survey, October 2021
- COVID-19 [Dashboard](#)
 - Tracking COVID-19 cases, hospitalizations, and deaths in NH
- Medical and Oral Health [Report Suites](#)
 - Updated Commercial and Medicaid data
- Rapid Response
 - Continued to support NH Bureau of Mental Health Services and Community Mental Health Centers through reporting and technical assistance



Health Law and Policy

Selected Highlights





Healthcare Sustainability: Perspectives on Cost, Affordability, and Access

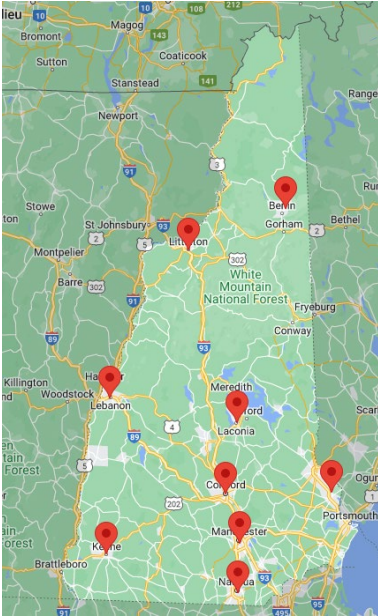
Health Law and Policy Annual Symposium | June 2021

UNH Franklin Pierce School of Law and the Institute for Health Policy and Practice hosted a session with three national experts to discuss:

- Why we need to address increasing health costs burdening families and businesses
- What can be done to make healthcare more affordable and sustainable?
- How stakeholders are activating across the country and across sectors to address escalating healthcare costs
- How to empower employers to improve access and affordability
- Goals for transforming misaligned incentives for a more equitable healthcare system

[Learn More!](#)





State Opioid Response (SOR)

The Institute for Health Policy and Practice continued to provide technical assistance to NH's State Opioid Response Team. Projects included, but were not limited to:

- Preparation for and participation in site visits
- Coordination of community stakeholder interviews
- Creation of tools to monitor operational and financial performance and sustainability



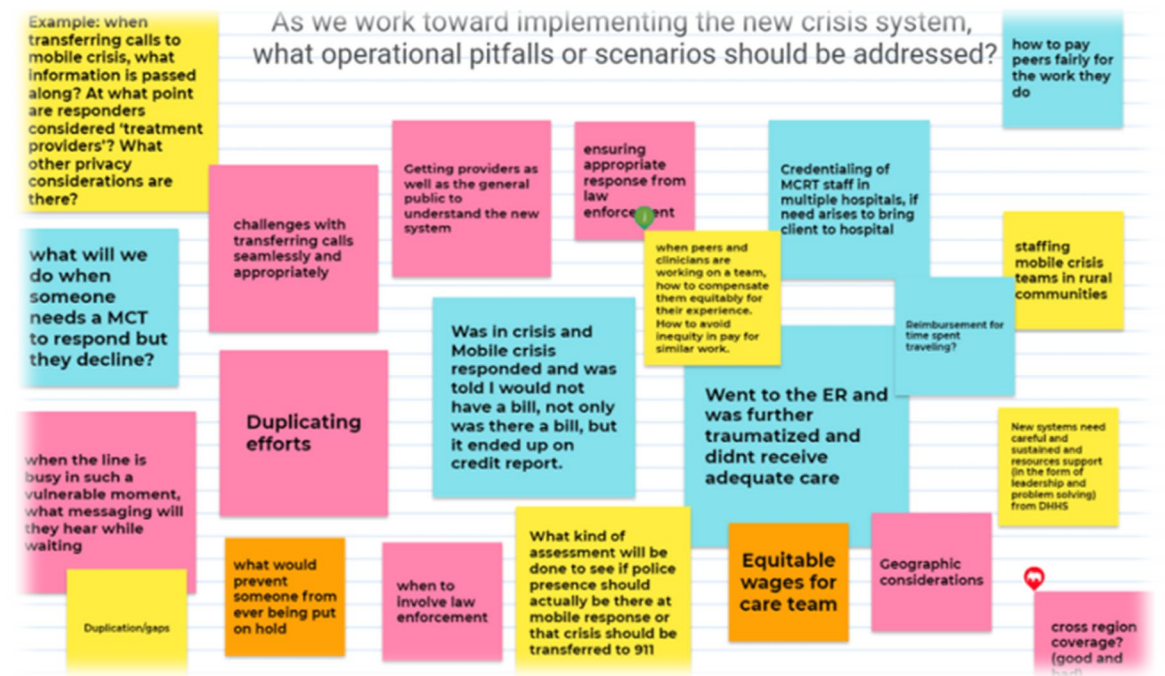
NH 988 Technical Assistance Project

Improving Access & Efficiency of Suicide Prevention & Vital Crisis Services in NH



NH 988 Pre-Launch Planning to Post-Launch Implementation

IHPP partnered with NH DHHS to support the planning for the launch of 988, the new, national Suicide and Crisis Lifeline number. We convened a multi-disciplinary, cross-sector stakeholder group to develop goals and action to support the roll out. This work advanced NH's vision of an improved crisis system that supports the three pillars of crisis response: someone to call, someone to respond, and somewhere to go. This process focused on data-driven decision making and centering the voices of lived experience to improve crisis response in New Hampshire.



Health Information Confidentiality Education & Trainings

3-Part Training on HIPAA, 42 CFR Part 2, and Patient Confidentiality

Network4Health (IDN 4), Connections for Health (IDN 6), and Creating Connections New Hampshire hosted a series on patient/client confidentiality and 42 CFR Part 2. The 3 interactive sessions combined some lecture with conversation, Q&A's, and hypothetical situations to give attendees as much information as possible on changes and developments in the privacy of substance use disorder treatment records, and how these privacy rules effect day to day work.

[Learn More!](#)



Long Term Care and Aging

Selected Highlights



Innovating Access to Long Term Supports and Services

Contract work with NH DHHS Bureau of Elderly and Adult Services

No Wrong Door Data Collection Form

This form was created to streamline the data collection process of the ServiceLink Resource Center Network demonstrating the Networks person-centered approach.

DATA COLLECTION FORM		
Client First Name: Mickey	Client Last Name: Mouse	
Client Age: 31	Client Gender: Male	
Client Race:	If Other Race, Explain: <input type="text"/>	
Client Ethnicity:	Contact(If Not Client): <input type="text"/>	
SLRC County: <input type="text"/>	Personal ID Number: <input type="text"/>	
Check All That Apply: <input type="checkbox"/> Individual with disability <input type="checkbox"/> Veteran <input type="checkbox"/> Caregiver <input type="checkbox"/> None apply		
Identified Needs and Wants: <input type="checkbox"/> Access to HealthCare <input type="checkbox"/> Employment Job Training <input type="checkbox"/> Food Access <input type="checkbox"/> Health Insurance <input type="checkbox"/> Housing <input type="checkbox"/> Mental Health <input type="checkbox"/> SUD Treatment <input type="checkbox"/> Transportation		
Information at First Person-Centered Counseling Encounter		
Date of First PCC: <input type="text"/>	90-Day Follow-Up Date: <input type="text"/>	
Living Setting: <input type="text"/>	Payor Source: <input type="text"/>	
Is this a SHIP Encounter? <input type="radio"/> Yes <input checked="" type="radio"/> No	Is this a VDC Encounter? <input type="radio"/> Yes <input checked="" type="radio"/> No	
PC Plan / Action Plan: <input type="radio"/> Yes <input checked="" type="radio"/> No	Plan Format: <input type="text"/>	
Encounter Sub-Forms		
Application Assistance	Hospital Care Transitions	NH Family Caregiver Support Program
Information at 90-Day Follow-Up		
Date of Follow-Up: <input type="text"/>	Contact(If Not Client): <input type="text"/>	
Living Setting: <input type="text"/>	Payor Source: <input type="text"/>	
In the past 90 days, approximately how many days were spent in the following settings:		
Personal Home Alone: <input type="text"/>	Personal Home with Others: <input type="text"/>	
Adult Foster Care/Adult Family Setting: <input type="text"/>	Assisted Living: <input type="text"/>	
Nursing Facility: <input type="text"/>	Provider Group Residential Home: <input type="text"/>	
Hospital: <input type="text"/>		

Person Centered Options Counseling Certification

Leveraging state-specific and nationally recognized curriculum, candidates complete their education and then take part in an intensive mentoring program to develop and practice the soft skills needed to deliver high-quality person-centered care and counseling. Innovative and unique, this program is the first DHHS-backed certification program of its type in New Hampshire.



Long Term Care and Aging Focal Area



Aging Research Activity



- Aspects of ICT connectivity among older adults living in rural subsidized housing: reassessing the digital divide
- Gen Silent Survey Project: New Hampshire





Healthy Aging in NH

IHPP's LTCA focus area collaborates with the Institute on Disability to coordinate programming for the UNH Center on Aging and Community Living (CACL).

- During 2021 CACL hosted the annual [Age of Champions Health & Wellness Fair](#).
- In the fall of 2021, CACL, in partnership with Casey Golomski (Associate Professor of Anthropology) and Allyson Ryder (Assistant Director, UNH Office of Community, Equity, and Diversity) hosted the [2021-22 Saul O Sidore Memorial Lecture Series, Aging in America: Justice for All?](#)

AGE OF CHAMPIONS ANNUAL HEALTH AND WELLNESS FAIR



Aging in America: Justice for All?





Institute for Health
Policy and Practice

Public Health and Health Promotion

Selected Highlights





Support for the New Hampshire State Health Assessment and State Health Improvement Plan Development

IHPP works with the Community Health Institute/JSI as the facilitation and support team to support the NH Department of Health and Human Services in the development of the SHA and SHIP. This includes convening the legislatively established SHA-SHIP Advisory Council.

[Learn More!](#)



Maternal & Child Health Epidemiology

Since 2003, IHPP has contracted with the NH Division of Public Health Services to staff the role of the State Maternal and Child Health Epidemiologist. For 18 years, David Laflamme held this position until moving on to become the epidemiology consultant for the Alliance for Innovation on Maternal Health (AIM).

Carolyn Nyamasege joined IHPP in May as the State Maternal and Child Health Epidemiologist. Previously, she worked as a postdoctoral research fellow, research assistant, and teaching fellow at the department of Clinical Trials and Clinical Epidemiology, University of Tsukuba, Japan. She also collaborated in research and grant writing with researchers from the African Population and Health Research Center, Department of Maternal and Child Wellbeing. She's passionate about improving MCH through conducting informed research/data analysis and dissemination of findings to key stakeholders to inform policy and practice.

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