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August 15, 2017

Ms. Claudia Lamphier, Town Administrator and
Board of Selectmen
Town of Effingham
68 School Street
Effingham, NH 03882

Dear Ms. Lamphier:

This letter is submitted to request funding of \$ 4,000 from the Town of Effingham for the support of home-based health care and supportive services delivered by Central New Hampshire VNA & Hospice. This year we are celebrating our Centennial year of providing 100 years of service to the communities in the Lakes Region.

During fiscal year 2016-2017, Effingham residents received 897 home health care, hospice and young family nursing visits delivered by the agency. Visits to Effingham residents by discipline or program are provided on an attached page. We are requesting funding to support Home Health, Hospice and Maternal Child Health services for the coming year.

In order to provide services that are not covered by insurance and to serve those without the means to pay, CNHVNAH conducts fundraising activities, seeks funding from individuals and private foundations, and requests funding from the towns that receive a substantial portion of subsidized care. Thanks to the generosity of the citizens of Effingham and the other communities we serve, we are able to continue offering services to all those who need them. I want to assure you that Effingham funds are used to service Effingham needs.

The following pages outline the ways in which Central New Hampshire VNA & Hospice uses town funding and provides a count of the services provided in Effingham during our most recent fiscal year.

It is our intention to continue to meet those needs and we hope we can rely on your assistance. We are deeply appreciative of the support we have received from Effingham in the past. If we can provide additional information about the role we play in Effingham as you move forward in the budget development, we will be happy to meet with you.

Sincerely,

Christine Long
Interim Executive Director

Corporate Office
780 N Main Street
Laconia, NH 03246
Tel: 603-524-8444 / 800-244-8549
Fax: 603-524-8217

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Wolfeboro Branch
240 S Main Street
PO Box 1620
Wolfeboro, NH 03894
Tel: 603-569-2729 / 888-242-0655
Fax: 603-569-2409

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Town of Effingham
Central New Hampshire VNA & Hospice

Visits and services provided to residents of the Town of Effingham during Central NH VNA & Hospice fiscal years 2015-2017 (April 1 - March 31).

	FY15	FY 16	FY 17
Visits by Discipline:			
Homecare Nursing	536	402	422
Physical Therapy/OT/ST	150	265	249
Medical Social Worker	19	11	21
Home Health Aide (LNA)	88	155	135
Young Family Support/MCH	7	4	1
Hospice/Palliative Care**	138	32	69
Pediatric Care Management	0	0	0
Total Visits Provided	938	869	897
Flu Shots	4	6	1
Charity Care/Bad Debt	\$ 130.16	\$ 1,846.25	\$ 210.00

****Hospice/Palliative Care** = Traditional end-of-life services through the formal hospice program and through a bridge program known as "Special Care" which focuses on symptom management and family support.

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Central New Hampshire VNA & Hospice Funding Request for 2018

Central New Hampshire VNA & Hospice requests funds to support the following programs and services. Funding is used to provide needed care to those without insurance or private funds, to match grant support for services to the elderly and disabled requiring a local match and to cover costs that are not support by other funding sources.

1. Provide *Hospice and Palliative Care* services that are not reimbursed by third party payers, such as adult and childhood bereavement support, volunteer training and placement, and spiritual counseling. Based on a consistent need, the agency also conducts community bereavement support – extending our bereavement support beyond those who were served in the hospice program to include those who experienced a loss through any means.
2. Provide support to the *Pediatric Care Management* and *Maternal Child Health* programs, which offer services to families with young children who are considered to be socially or medically at risk, i.e., problems such as developmental disability, premature birth, adolescent parents, alcoholism and chronic illness.
3. Provide support for the community clinics including immunization clinics, influenza vaccine clinics, blood pressure and foot care clinics. These efforts not only prevent communicable disease, but they connect uninsured residents with a regular medical provider.
4. Provide support for general home care services for those who have inadequate or no health insurance coverage. In particular, these dollars help to support the care given to patients with Medicaid, the health insurance for low-income people. Medicaid reimbursement covers approximately one-half of the cost of home care visits, and the volume of Medicaid clients has risen dramatically.
5. Provide professionally led *Support Groups* to assist those who have suffered the loss of a loved one in the past year.

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