New Hampshire
Regional Public Health Networks (RPHN)

Building a Safe and Healthy New Hampshire

The goal of the New Hampshire Regional Public Health Networks (RPHNs) is for all New Hampshire residents to be healthy and safe by involving broad public health interests (health, safety, government, education, business, communities) in working together to address complex public health issues. One of these issues is the need to ensure the availability of and/or access to substance misuse services (health promotion, prevention, early identification and intervention, treatment, recovery support services) Continuum of Care (CoC) in for citizens in each RPHN.

Continuum of Care (COC) Development in New Hampshire

The New Hampshire Department of Health and Human Services (DHHS), Bureau of Drug and Alcohol Services (BDAS) has determined that the best way to prevent and/or decrease the damage that substance misuse causes to individuals, families, and communities is to develop a robust, effective, well-coordinated and accessible continuum of care in each RPHN, Regional continuum of care development work is guided by a fulltime regional COC facilitator and is coordinated with emerging initiatives (e.g., Integrated Delivery Networks), and integration with primary health care and mental health service providers.

Ways we are working to address needs statewide

Needs	How we are addressing the needs	How we will know if we are successful
Prevention education in schools	Collect data to better understand prevention program needs	Increased prevention services available in the region
Coordinated assessment and referral process	Understand assessment and referral process and assist/guide organizations in increasing consistency across organizations	Increased coordination reported among partners providing care assessments and referrals
Capacity of and access to services	Address services capacity and barriers to service access issues	Increased number of and access to services
Recovery support services	Support the development of recovery support services	Increased support services for family and friends of those seeking recovery

Roles of the COC Facilitator

The role of the Continuum of Care (CoC) Facilitator is to bridge the components of the Substance Use Disorder (SUD) Continuum of Care in their respective networks, including **health promotion, prevention, early identification and intervention, treatment, recovery supports** and coordination with primary health and behavioral health care.

1. Community organization and relationship building among stakeholders within the full continuum of care

Example: *Educating current and new stakeholders on the value of CoC development and the importance and value of their participation*

2. Convening, facilitating and being a part of opportunities for collaboration with regional BH/SUD experts and service providers

Example: *Summarizing ideas of multiple leaders and bring them together to propose actions and facilitate practical solutions*

3. Providing information and resources to improve systems of care and integration of behavioral and medical healthcare

Example: *Providing guidance to all stakeholders and making sure that they have an accurate understanding of SUD*

Capital Area Public Health Network Highlights:

- In collaboration with the Substance Misuse Prevention Coordinator (SMP), works to support and provide **AWARENESS** to stakeholders, consumers, persons with substance use disorders, schools, coalitions, recovery groups, primary care providers, law enforcement and others about SUD services available and help identify any gaps in services that may be apparent in their work.
- Helps to provide **ACCESS** to services needed by partnering and linking constituent groups directly to programs and services including behavioral health services and primary care services to ensure and promote integration along the continuum.
- Promotes **COLLABORATION** among experts in each sector to invite them to workgroups and regional community efforts to continue to share information, best practices and skills that will strengthen service coordination and communication across the continuum. Along with this effort, identifying barriers to service and gaps in the service delivery system and begin to address the issues at each possible level is within the scope of the CoC. Building **CAPACITY** to help meet these needs is key in CoC work.

Current Initiatives:

- **Continuum of Care Workgroup–** Service providers, stakeholders, key community members, recovery program directors, members of the juvenile justice system, law enforcement, EMS provides, family support members and others are meeting bi-monthly to begin developing an active coalition to will look at services/barriers across the complete system of care and discuss possible solutions. The CoC Workgroup is prioritizing evidence-based programs, practices and policies; advancing the coordination of services among partners; and promoting community engagement on Substance Use Disorder issues.
- **Assets and Gaps Assessment:**
  - The CoC workgroup is addressing the recently finalized Assets and Gaps Assessment and developing strategies to look at all aspects of Substance Use Disorders and collaboratively analyze the most effective, efficient and comprehensive way to address barriers across the Continuum and adopt the "No Wrong Door" approach.
  - Prevention efforts continue with work on the local level with area prevention coalitions, youth programs, and school activities such as " Life of An Athlete," Safe Schools Programs and Prescription Take Back Boxes.

RIVERBEND COMMUNITY MENTAL HEALTH, INC.

CAPITAL AREA Public Health Network an Initiative of Granite United Way

NH DEPT. OF HEALTH AND HUMAN SERVICES NHBDAS BUREAU OF DRUG AND ALCOHOL SERVICES Promoting Prevention and Recovery

CENTER FOR EXCELLENCE Addressing Alcohol & Drug Misuse in NH

NH DIVISION OF Public Health Services Improving health, preventing disease, reducing costs *for all* Department of Health and Human Services