



A Study of
Community Health and Healthcare Needs
Southington, Connecticut

April 2020

Introduction

The Main Street Community Foundation is dedicated to enhancing the quality of life for both present and future generations in the Connecticut communities of Bristol, Burlington, Plainville, Plymouth, Southington and Wolcott by encouraging and promoting gift planning, prudent stewardship of assets, effective grantmaking, and community leadership. A nonprofit public charity created by private citizens, the Foundation works with donors in these communities who wish to build permanent charitable endowments to support their communities.

In 2013, the Foundation commissioned a community health needs assessment to better understand health and healthcare needs in the Southington community and to identify areas where support from the Main Street Community Foundation might address gaps in services and promote the health and well-being of community members. This study led to the decision to begin a community-based grantmaking program to support capital improvements and programmatic activities that promote the health and healthcare needs of Southington residents. The Barnes Memorial Trust Advisory Committee identified four priority areas for investment: Accessibility and Affordability of Healthcare; Substance Use and Mental Health; Health and Healthcare Needs for an Aging Population; and Better Integrated Healthcare.

In 2019, the Barnes Memorial Trust Advisory Committee commissioned this update to the 2013 needs assessment, with a focus on identifying the progress made to date in the four current priority areas, continuing need in these areas, and any other pressing health or healthcare needs in Southington. The Barnes Memorial Trust Advisory Committee will use this analysis to refine its strategy for the next few years.

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Executive Summary

Study Purpose and Methodology

This study was conducted for the Bradley Henry Barnes & Leila Upson Barnes Memorial Trust of the Main Street Community Foundation to better understand health and healthcare needs in the Southington community. A similar study was conducted in 2013 and helped the Barnes Memorial Trust Advisory Committee to identify four priority areas for capital and program investments: Accessibility and Affordability of Healthcare; Substance Use and Mental Health; Health and Healthcare Needs for an Aging Population; and Better Integrated Healthcare. This study examines the progress made to date in the four priority areas, continuing need in these areas, and any other pressing health or healthcare needs in Southington. The Committee will use this analysis to refine its strategy for the next few years. Data for this study come from grant documentation, secondary sources, and four focus groups and ten interviews conducted with key stakeholders and community representatives.

Barnes Memorial Trust Grantmaking 2013-2019

Over the seven years of grantmaking since 2013, the Barnes Memorial Trust has provided grants totaling \$4,273,497 to address the health and healthcare needs of Southington residents. Barnes Memorial Trust grant funding has increased steadily from 2014 to 2019. Capital grantmaking comprised \$1,488,541 over this period, or 35% of total grantmaking.

Of the four Barnes Memorial Trust priority areas, grantmaking was highest in the area of addressing the health and healthcare needs of an aging population, with over two million in grantmaking between 2013 and 2019. This was followed by grantmaking in behavioral health (\$1.4 million). Grantmaking in the areas of integrated healthcare/healthy living and accessibility and affordability of healthcare was substantially lower than for the other two areas, at slightly over half a million dollars each.

Southington Demographic and Health Status Overview

According to the U.S. Census, the population of Southington was 43,817 in 2017. The population grew by 10% from 2000 and is projected to decline slightly over time, to 42,639 by 2040. About 20% percent of Southington's population was over age 65 in 2017 and 20.5% of the community's population was under 18. About 92% of Southington's population was Non-Hispanic White in 2017.

The health status of Southington adults is similar to the state: 88.1% reported good or better health and 85.8% reported good physical health. Data about age-adjusted mortality rates indicate that mortality rates overall in Southington in 2008-2012 were comparable to those for the state. The mortality rate due to Alzheimer's disease was substantially higher. Southington had higher overall cancer rates than the state. Mortality rates for many causes have declined between 2003-2007 and 2008-2012, in Southington and the state overall. Southington saw statistically significant declines in overall mortality rates and mortality due to diabetes, major cardiovascular disease, and pneumonia and influenza over this time period.

The median household income in Southington in 2017 was \$90,796, higher than for the state as a whole (\$73,781). The poverty rate in Southington was 3.6% in 2017 and 29% of Southington residents are considered below the ALICE (asset limited, income constrained and employed) threshold, meaning that they struggle financially and, although working hard, face challenges affording basic necessities such as housing, childcare, transportation, healthcare, and food. About 40% of Southington's residents have a Bachelor's degree or higher, a rate similar to the state as a whole. Lack of affordable housing was frequently mentioned in focus groups and interviews conducted for this study. One quarter of Southington households are housing cost-burdened, meaning that they spend 30% or more of their household income on housing costs. Quantitative data indicate that an estimated 95.7% of Southington households have a car; however, those participating in focus groups and interviews noted that transportation is a concern for some, especially for seniors, those who are disabled, and youth.

Barnes Memorial Trust Priority Areas

Mental Health and Substance Use

Between 2013 and 2019 the Barnes Memorial Trust granted over \$1.4 million to fund programs and infrastructure to address behavioral health needs in the community, including the Southington Health Outreach Project, a variety of behavioral health services, a behavioral health clinic in Southington, the All Access Program at Southington Community Cultural Arts Center, and professional development for supporting youth social-emotional learning.

Of all health concerns in the community, mental health was the most frequently mentioned in focus groups and interviews conducted for this study. Mental health of children and youth, including transition-age youth, is of most concern. Calls from Southington residents to 211 about mental health assessment and treatment comprised the largest proportion of service calls in the past year, 20% of all calls. The proportion of Southington students who reported that they felt sad or depressed most or all of the time over the past month and who have attempted suicide has risen between 2012 and 2017. Provider challenges exist, including an insufficient number of mental health providers for children and youth (child psychiatrists and psychologists in particular) and insurance limitations on the type and length of services that are covered by insurance.

Perceptions about substance misuse in Southington were mixed. Some reported that this was not as pressing an issue as other community health concerns, while others reported that this was of high concern. The latter pointed to rising opioid overdoses in the community and those working in schools expressed concern about drinking and vaping among students and growing acceptance of marijuana in society. Data about the number of mental health and substance use admissions in Southington indicates that the number of admissions for substance use treatment among Southington residents has risen substantially between 2013 and 2016.

Focus group and interview participants' suggestions to address behavioral health challenges in the community include: continuing to fund the Southington Health Outreach Project;

supporting programming that reaches transition-age youth; continuing to fund community-based behavioral health services and professional development; and supporting efforts that raise awareness of behavioral health issues.

Health and Healthcare Needs of an Aging Population

Between 2013 and 2019 the Barnes Memorial Trust granted over \$2 million to address the health and healthcare needs of Southington seniors. Highlights from these investments include creation of the Dementia Friendly Southington Initiative, support for transportation services for seniors, development and expansion of the Hope Full Lives caregiver training program, expanded fitness programming for seniors, support for capital investments that improve health and social services for seniors, and increasing access to audiological care and equipment.

Focus group members and interviewees stressed the importance of continuing to address the needs of Southington's older and aging residents. They saw an opportunity to continue these services, as well as those that support seniors to "age in place." They additionally reported that more work is needed to identify and reach isolated seniors. Participants in focus groups and interviews, including seniors themselves, noted that many seniors live on fixed incomes and face financial challenges, especially as they are living longer.

When asked about areas in which Barnes Memorial Trust funding could be beneficial to address the health and healthcare needs of aging Southington residents, focus group members and interviewees suggested: continuing to fund the Dementia-Friendly Southington Initiative and the transportation services for seniors; building a community-wide stakeholder group working on aging issues similar to the Southington Health Outreach Project stakeholder group; identifying ways to reach isolated seniors; programs that provide financial assistance for healthcare costs; expanding dental services for low-income seniors; and providing support for programming that helps seniors to "age in place."

Integrated Health and Healthy Lifestyles

While Integrated Health was identified as a priority for the Barnes Memorial Trust in 2013, grant requests for this were not submitted and the priority area was expanded in 2016 to also include healthy lifestyles. To date, the Barnes Memorial Trust has provided over \$570,000 in grants to support this priority area. Key areas of success to date include a new diabetes prevention program at the YMCA, programming that addresses food insecurity, educational workshops for parents and caregivers of young children, capital investments to support healthy lifestyles, and support for Hartford Healthcare's Healthy Family FunFest.

When asked about obesity in the community, some interviewees and focus group participants identified this as a health concern, especially among children and youth, while others did not. Food insecurity was identified as an issue for some in Southington, especially those who do not have transportation and seniors who are home bound. Supporting healthy behaviors was identified as a priority area for The Hospital of Central Connecticut in its recent community

health improvement plan, including increasing access to healthy food through partnership with food pantries, gardens, and mobile food programs.

Focus group members and interviewees provided a few suggestions for additional programming in healthy living, including supporting a pantry that has paper goods, paper towels, bath tissue, napkins and supporting programs that engage in health promotion.

Accessibility and Affordability of Healthcare

Between 2013 and 2019, the Barnes Memorial Trust has invested about \$540,000 in three projects that have addressed access to and affordability of healthcare, while also each addressing other Trust priority areas.

Focus group members and interviewees reported that Southington residents have good access to healthcare. Numerous participants mentioned the ongoing conversation about the future of The Hospital of Central Connecticut Bradley Memorial campus and specifically emergency services, noting that decisions about these will affect the healthcare landscape in the community. The aging healthcare workforce in the community, healthcare costs including those for dental, vision, and hearing care, and navigating the healthcare and insurance systems were all identified as issues.

Suggestions to enhance healthcare access and affordability provided by study participants included supporting efforts that help patients navigate healthcare and funding of programs that provide low-income residents with financial assistance for healthcare costs.

Cross-Cutting Issues

Several cross-cutting themes also emerged that may have implications for Barnes Memorial Trust grantmaking:

- *Social determinants of health: Housing and transportation.* As in the 2013 assessment, focus group members and interviewees in 2019 reported that both transportation and housing continue to be challenges for the Southington community.
- *Anticipated pressures on nonprofit operating costs.* Nonprofit leaders noted that they expect to see substantial increase in operating costs over the next several years as the minimum wage is scaled up. They expressed concern about meeting these costs while at the same time continuing to fund operational costs such as technology, safety, and insurance, and to provide high quality services.
- *Lack of public awareness of Southington's challenges.* Several focus group and interview participants suggested that more could be done to raise awareness of community issues—especially as they relate to youth.
- *Southington has many services, but some are not aware of these.* As was the case in 2013, focus group members and interviewees in 2019 described Southington as a community with many services. However, there are community members who are not aware of these services and could benefit from them.

Data Collection Methodology

This analysis covers the town of Southington including the neighborhoods of Milldale, Marion, and Plantsville. This report presents an analysis of quantitative and qualitative data that come from a variety of sources:

- *Grant Documentation.* Grant proposals and progress and final grant reports provided information about Barnes Memorial Trust grantmaking since 2013. This documentation was obtained for all past and current grants.
- *Secondary Data.* The report relies on existing data to examine the social, economic and health context in Southington including health outcomes. These data come from a variety of sources including the U.S. Census, vital records, the Connecticut Department of Public Health, the Connecticut State Department of Education, and 211. Some data from Connecticut DataHaven's Community Wellbeing Survey conducted in 2015 are also included.
- *Focus Groups with Community Residents and Other Stakeholders.* Four focus groups with a variety of community stakeholders were conducted in November 2019 to gather a more in-depth perspective on health and health care status and needs in Southington and progress made with Barnes Memorial Trust grantmaking to date. Three focus groups were convened with service providers, grantees, and other stakeholders involved in the areas of current Trust priorities: behavioral health; aging; integrated healthcare and healthy lifestyles. One focus group was conducted with senior residents of Southington. The number of focus group participants ranged from nine to twelve and each group was between 60 and 90 minutes in duration. In total, 43 individuals participated in focus groups. A list of focus group members is provided in Appendix C. The questions discussed in the focus groups are provided in Appendix D.
- *Key Informant Interviews.* Additional in-depth information was gathered through in person and phone interviews with ten key informants from a variety of sectors. The interviews were 30 minutes in duration and covered the pressing health needs in Southington, existing services, and unmet needs. The list of interviewees is provided in Appendix C. The interview questions are provided in Appendix E.

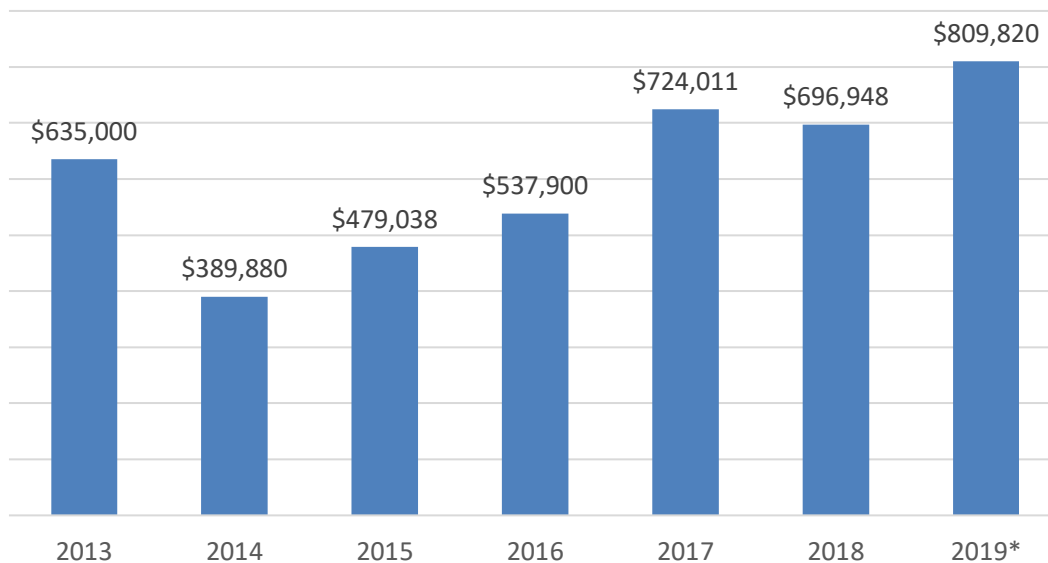
It is important to note that there are several limitations to the data. Focus group members and interviewees were a sample of individuals selected because they are leaders in the community, are service providers and/or Barnes grantees, and because they represented different sectors of the community. However, there is no way of knowing how aligned or divergent their views are from the general Southington population or other providers in the community. Nevertheless, focus groups and interviews are a common data collection methodology in community needs assessments because they provide an in-depth perspective on a community and allow for insights and discussion that cannot be obtained through more quantitative approaches.

Barnes Memorial Trust Grantmaking 2013-2019

This section provides an overview of the Barnes Memorial Trust grantmaking since 2013. Individual grant summaries can be found in Appendix B. Over the seven years of grantmaking since 2013, the Barnes Memorial Trust has provided grants totaling \$4,273,497 to address the health and healthcare needs of Southington residents. Barnes Memorial Trust grant funding has increased steadily from 2014 to 2019. (Figure 1)

Capital grantmaking¹ comprised \$1,488,541 over this period, or 35% of total grantmaking. Grantmaking in 2013 focused exclusively on capital support as Foundation staff worked to put processes in place to implement the new programmatic grantmaking strategy; three large capital grants were made that year. Funding in subsequent years included both capital and program grants.

Figure 1. Total Barnes Memorial Trust Grantmaking by Year

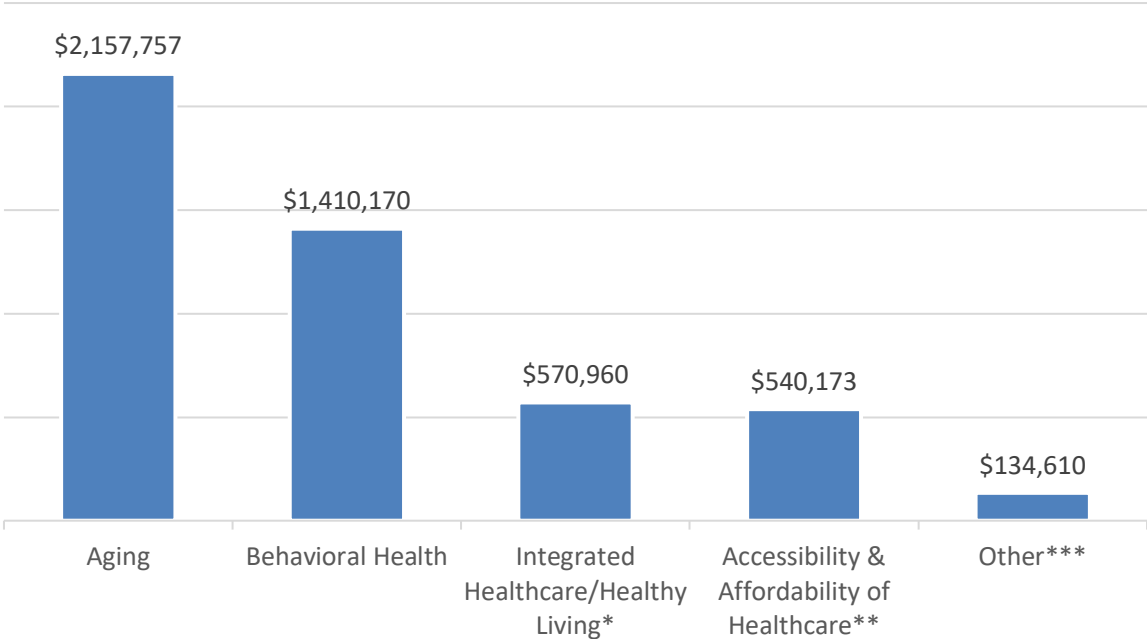


*Includes a grant for which \$100,000 is payable in 2020.

Of the four Barnes Memorial Trust priority areas, grantmaking was highest in the area of addressing the health and healthcare needs of an aging population, with over two million in grantmaking for this area between 2013 and 2019. (Figure 2) This was followed by grantmaking in behavioral health. Grantmaking in the areas of integrated healthcare/healthy living and accessibility and affordability of healthcare was substantially lower than for the other two areas, at slightly over half a million dollars each. It should be noted, however, that the three grants funded in the area of accessibility and affordability of healthcare also address other Barnes Memorial Trust priority areas because their purposes overlap with these other areas.

¹ Includes capital grants and program grants with capital expenditures of greater than 10% of the total grant value.

Figure 2. Total Barnes Memorial Trust Grantmaking 2013-2019 by Priority Area



*Includes a grant for which \$100,000 is payable in 2020.
 **Each of the three healthcare grants is also categorized in another priority area.
 ***Other includes one capital grant for THOCC, a grant for a sustainability study of the Bradley Memorial campus, and community sponsorships.

Table 1 presents grantmaking by priority area and year. Overall, and throughout 2013-2019, grantmaking in the areas of aging and behavioral health have been highest of the priority areas. Grantmaking in integrated health/healthy living has increased over time. This is because the priority area shifted in focus. Initially, the Barnes Memorial Trust identified the priority area as integrated health in response to a finding from the 2013 community needs assessment report that indicated a need to support healthcare that integrates behavioral health services into primary care. However, no grant requests were received and in 2016, grantmaking in this area was expanded to include support for healthy living activities which was also identified as an area of need in the 2013 health assessment. Three programs in the accessibility and affordability of healthcare priority area have been funded between 2013 and 2019: one that provides transportation for seniors, one that provides information about behavioral health services, and one that expanded behavioral health services in the community. A few grants have been made over the years that fall outside the Barnes Memorial Trust priority areas (“Other” grants). Two larger “other” grants supported needs of The Hospital of Central Connecticut’s Bradley Memorial campus (\$100,000 for a sustainability study of the campus and \$25,860 for a Glidescope for the emergency room) while the others were smaller sponsorship grants.

Table 1. Barnes Memorial Trust Grantmaking by Priority Area by Year

Year	Aging	Behavioral Health	Integrated Healthcare/ Healthy Living*	Accessibility & Affordability of Healthcare**	Other***
2013	\$635,000				
2014	\$205,000	\$79,000	\$5,880	\$79,000	\$100,000
2015	\$207,103	\$236,075	\$10,000	\$79,075	\$25,860
2016	\$210,000	\$255,400	\$72,500	\$80,000	
2017	\$396,261	\$294,600	\$33,150	\$174,000	
2018	\$363,098	\$269,300	\$160,800	\$128,098	\$3,750
2019	\$241,295	\$275,795	\$288,630		\$5,000

*Includes a grant for which \$100,000 is payable in 2020.
 **Each of the three healthcare grants is also categorized in another priority area.
 ***Other includes one capital grant for THOCC (2015), a grant for a sustainability study of the Bradley Memorial campus (2015), and community sponsorships (2018 and 2019).

Southington Demographic and Health Status Overview

Demographic Overview²

According to the U.S. Census, the population of Southington was 43,817 in 2017. The population grew by 10% from 2000 and is projected to decline slightly over time, to 42,639 by 2040.³

About 20% percent of Southington’s population was over age 65 in 2017, compared to 16% for the state; 20.5% of the community’s population was under 18, a rate similar to the state (21.2%). The high proportion of seniors and aging residents in the community led the Barnes Memorial Trust to identify the health and healthcare needs of aging residents as a funding priority in 2013.

About 92% of Southington’s population was Non-Hispanic White in 2017, higher than the state proportion of 68%. The population of Southington is slowly diversifying: in 2017, about 3.6% of the population was Hispanic; 1.2% was Black Non-Hispanic; and 3.3% was of another race and non-Hispanic.

Overall Health & Mortality Rates

According to data shared in The Hospital of Central Connecticut’s (THOCC) 2018 community health needs assessment, the health status of adults in Southington is similar to the state: 88.1% reported good or better health and 85.8% reported good physical health.⁴

²Unless otherwise noted, data were obtained from Connecticut Data Haven for Southington, <https://www.ctdatahaven.org/profiles/southington>
³University of Connecticut, Connecticut State Data Center, <https://data.ct.gov/Government/2015-2040-Population-Projections-Town-Level/p6hp-fnp7/data>

Quantitative data about age-adjusted mortality rates indicate that mortality rates overall in Southington in 2008-2012 were comparable to those for the state. (Table 2) Southington experienced slightly higher rates of mortality due to cardiovascular disease, cancer, diabetes-related issues, chronic liver disease, and drug-induced deaths than the state overall in 2008-2012. Notably, mortality rates due to Alzheimer’s disease were substantially higher—almost double—in Southington (31.2 deaths per 100,000 population) than the state (16.9 deaths per 100,000 population). Southington had higher overall cancer rates than the state; in particular, the town had higher rates of pancreatic cancer and lower rates of colorectal cancer than the state in 2008-2012. (Table 3) Rates of mortality due to chronic lower respiratory disease, infectious and parasitic diseases, and pneumonia and influenza were lower in Southington than for the state in 2008-2012.

Mortality rates for many causes have declined between 2003-2007 and 2008-2012, in both Southington and the state overall. Southington saw statistically significant declines in overall mortality rates and mortality due to diabetes, major cardiovascular disease, and pneumonia and influenza between 2003-2007 and 2008-2012.

Table 2. Age-Adjusted Mortality Rate per 100,000 population, 2003-2007 and 2008-2012⁵

	Connecticut 2003-2007	Connecticut 2008-2012	Southington 2003-2007	Southington 2008-2012
All causes	700.1	660.4	744.2	651.2
Major Cardiovascular Diseases	230.9	200.2	244.5	207.2
Malignant Neoplasms (Cancer)	175.7	159.9	188.9	164.3
Chronic lower respiratory diseases	34.5	32.2	33.1	26.5
Infectious and parasitic diseases	24.1	22.8	13.3	13.9
Diabetes-related ⁶	62.4	49.1	74.3	53.5
Alzheimer’s disease	15.3	16.9	28.9	31.2
Pneumonia and Influenza	18.8	13.7	21.4	9.4
Chronic liver disease and cirrhosis	7.4	7.4	9.2	9.8
Nephritis, nephrotic syndrome, nephrosis	13.5	13.1	13.2	13.4
All injuries	43.2	46.9	46.1	44.7
Accidents	31.8	33.3	35.9	33.4
Alcohol-induced	4.8	4.9	NA	NA
Drug-induced	10.7	10.9	12.5	12.9

⁴ Hartford Healthcare, *The Hospital of Central Connecticut Community Health Needs Assessment, June 2018*. Southington includes Southington, Plainville, and Wolcott.

⁵ The age-adjusted mortality is a mortality rate that has been statistically modified to eliminate the effect of different age distributions among different populations. Data Source: Backus K, Mueller L. (2015) *Age-Adjusted Mortality Rates for Connecticut Towns, 2008-2012*. Hartford, CT: Connecticut Department of Public Health.

⁶ Defined as the number of deaths due to diabetes reported as the underlying or multiple cause of death.

Table 3. Age-Adjusted Cancer Mortality Rates per 100,000 Population, 2003-2007 and 2008-2012⁷

	Connecticut 2003-2007	Connecticut 2008-2012	Southington 2003-2007	Southington 2008-2012
All Cancers	175.7	159.9	188.9	164.3
Colorectal cancer	15.8	12.9	14.9	10.3
Lung cancer	47.3	41.7	57.5	41.8
Pancreatic cancer	11.6	11.5	10.8	14.7

In 2015, Connecticut Data Haven conducted a health and wellbeing survey that provided weighted estimates for Southington adults. These data, although a few years old, provide some insights into the health status of Southington adults. As Table 4 shows, reported rates of hypertension and high cholesterol are slightly higher in Southington than in the state.

Table 4. Chronic Disease among Southington and Connecticut Adults, 2015⁸

	Connecticut	Southington
High blood pressure or hypertension	28%	32%
High cholesterol	23%	27%
Diabetes	9%	11%
Heart disease or heart attack	5%	5%
Stroke	2%	3%
Asthma	13%	14%

Social Determinants of Health⁹

One’s health status is affected by more than one’s personal health behaviors or access to health care. As noted by Grantmakers in Health, “decades of research and practical experience in the United States and other countries have shown that a number of economic and social factors – education, income, occupation, wealth, housing, neighborhood environment, race and ethnicity – have a powerful influence on health.”¹⁰ Generally referred to as the “social determinants of health” these factors positively and negatively affect health in a community.

⁷ Connecticut Department of Public Health. Mortality rates not reported for causes of death with <15 deaths thus not all cancers represented. Data Source: Backus K, Mueller L. (2015) *Age-Adjusted Mortality Rates for Connecticut Towns, 2008-2012*. Hartford, CT: Connecticut Department of Public Health.

⁸ Connecticut DataHaven Community Wellbeing Survey, 2015. Proportion of adult respondents who responded having been told by a doctor or health professional that they have this condition. The survey results for Southington represent weighted estimates from the larger Connecticut sample and thus, results should be interpreted with caution.

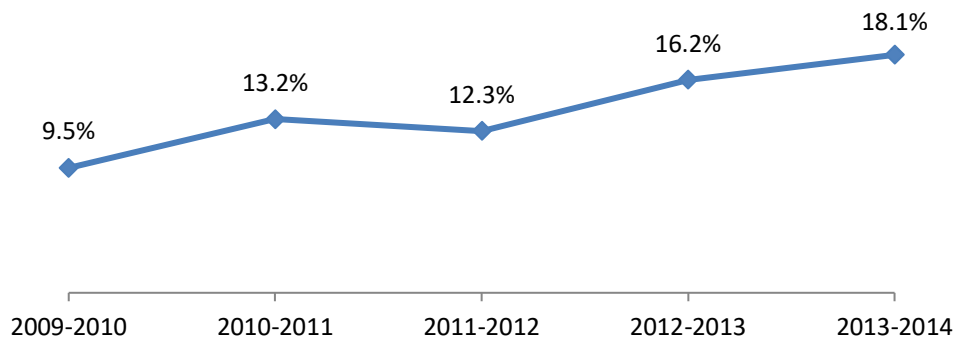
⁹ Unless otherwise noted, data were obtained from Connecticut Data Haven for Southington, <https://www.ctdatahaven.org/profiles/southington>

¹⁰ <http://www.gih.org/Focus/FocusOnIssues.cfm?MetadatalD=24>

Income and Poverty

The median household income in Southington in 2017 was \$90,796, higher than for the state as a whole (\$73,781). The poverty rate in Southington was 3.6% in 2017, while the state rate was 10.1%. According to a recent report by the United Ways of Connecticut, 29% of Southington residents are considered below the ALICE (asset limited, income constrained and employed) threshold, meaning that they struggle financially and, although working hard, face challenges affording basic necessities such as housing, childcare, transportation, healthcare, and food.¹¹ This compares to 40% of residents below the ALICE threshold in the state overall. The proportion of children (Grade 3) eligible for free or reduced lunch in Southington has grown steadily between school years 2009-2010 and 2013-2014, from 9.5% to 18.1%. (Figure 3)

Figure 3. Proportion of grade 3 students eligible for free or reduced lunch, Southington¹²



Education

About 40% of Southington's residents have a Bachelor's degree or higher, a rate similar to the state as a whole. Additionally, the four-year graduation rate in the community was 93.4% in school year 2013-2014, higher than the 2010-2011 rate of 90.5% and higher than the 2013-2014 rate for Connecticut (87%).¹³

Housing

Lack of affordable housing was frequently mentioned in focus groups and interviews conducted for this study; this was similarly noted as a challenge in the 2018 THOCC community health needs assessment. One quarter of Southington households are housing cost-burdened meaning that they spend 30% or more of their household income on housing costs; 35.8% of residents in the state overall are housing cost-burdened. Data from 211, a free information and referral service, indicate that calls from Southington about housing/shelter accounted for 18% of all service requests in the past year (July 2018-June 2019), the second highest number of

¹¹ Connecticut United Ways, 2018, *ALICE: A Study of Financial Hardship in Connecticut*.

https://alice.ctunitedway.org/meet_alice/southington/. Statistics include those below the federal poverty rate.

¹² Connecticut State Department of Education data cited by the Connecticut Data Collaborative.

¹³ Connecticut State Department of Education data cited by the Connecticut Data Collaborative.

calls after mental health assessment and treatment; calls about utilities accounted for 12%, the third highest number of calls.¹⁴

Transportation

Transportation continues to be challenging for some Southington residents, as it was in 2013. Quantitative data indicate that an estimated 95.7% of Southington households have a car while 91% of Connecticut residents have a car. Those participating in focus groups and interviews noted that while more transportation services are available now, constraints still remain, especially for seniors, those who are disabled, and youth.

Barnes Memorial Trust Funding Priority Areas 2013-2019

This section brings together quantitative data and insights from interviews and focus groups to describe Barnes Memorial Trust grantmaking successes to date and current needs in each priority area.

Mental Health and Substance Use

Mental health and substance use were identified as top health issues in Southington 2013, with concerns among seniors and youth most frequently mentioned. Focus group members, interviewees, and respondents to a community survey conducted at that time saw a need for more services, better integration of behavioral health and primary care, and more public education to address the stigma associated with these illnesses.

Between 2013 and 2019 the Barnes Memorial Trust granted over \$1.4 million to fund programs and infrastructure to address behavioral health needs in the community, including:

- *Creation of the Southington Health Outreach Project.* The goal of this Project is to enhance access to mental health and substance use programs by: convening a quarterly stakeholder group; holding outreach hours for residents throughout Southington; providing community training; producing and updating a behavioral health directory; and educating the public through participation in community events. Focus group members and interviewees credited this initiative for raising awareness of community resources to address behavioral health, connecting residents to needed services, and increasing collaboration and information-sharing across behavioral health services providers.
- *Funding for services.* The Barnes Memorial Trust has supported the behavioral health needs of Southington residents by funding: prevention, intervention, and recovery services offered by Living in Safe Alternatives (LISA, Inc.); domestic violence intervention and prevention services provided by the Prudence Crandall Center; and services to healthcare professionals struggling with behavioral health concerns (Health Assistance InterVention Education Network).

¹⁴ Data provided by the United Way of Connecticut.

- *Establishment of a behavioral health clinic in Southington.* With Barnes Memorial Trust funding, THOCC created a behavioral health clinic in Southington that provides both group services and individual mental health support as well as substance use recovery support and served 138 patients in its first year (2018).
- *Development and expansion of the All Access Program.* Grants over several years enabled the Southington Community Cultural Arts Center (SOCCA) to develop the All Access Program that provides a creative outlet and enhances self-confidence among adults with disabilities, veterans, and those with dementia. The program expanded from 10 Southington residents in 2015 to over 70 in 2019.
- *Supported professional development for social-emotional learning among Southington’s educators.* A Barnes Memorial Trust grant is enabling educators in 440 Southington classrooms to successfully implement an approach to support healthy social-emotional development of students through a new partnership with the Southington Education Foundation.

Both quantitative and qualitative data suggest that mental health and substance use continue to be pressing health concerns for the Southington community. Of all health concerns in the community, mental health was the most frequently mentioned. Mental health of children and youth, including transition-age youth, is of most concern according to focus group participants and interviewees, attributable to media, bullying, stress, and trauma. Participants pointed to high youth suicide rates and increasing behavior issues among very young children. Closely related are the effects of trauma and domestic violence and a rise in dating violence and sexual assault in schools. While some reported that stigma about mental illness is decreasing, they also shared that there is a “sense of denial” about behavioral health issues among parents and in the community more generally.

Quantitative data shared in THOCC’s community health needs assessment indicate that adults in Southington experienced levels of mental health similar to the state: 86.2% reported good mental health and 19.2% reported that they experienced depression.¹⁵ Calls from Southington residents to 211 about mental health assessment and treatment comprised the largest proportion of service calls in the past year (July 2018-June 2019), 20% of all calls; 3% of calls were for substance use disorder services.

Among youth, data from Southington STEPS point to rising concerns about mental health among Southington youth. The proportion of students who reported that they felt sad or depressed most or all of the time over the past month and who have attempted suicide has risen between 2012 and 2017. (Table 5)

¹⁵ Hartford Healthcare, *The Hospital of Central Connecticut Community Health Needs Assessment, 2018*. Southington includes Southington, Plainville, and Wolcott.

Table 5. Self-reported mental health concerns among youth, Southington¹⁶

	Southington 2012	Southington 2017
Felt sad or depressed most or all of the time in the last month	12%	16%
Attempted suicide one or more times	9%	12%

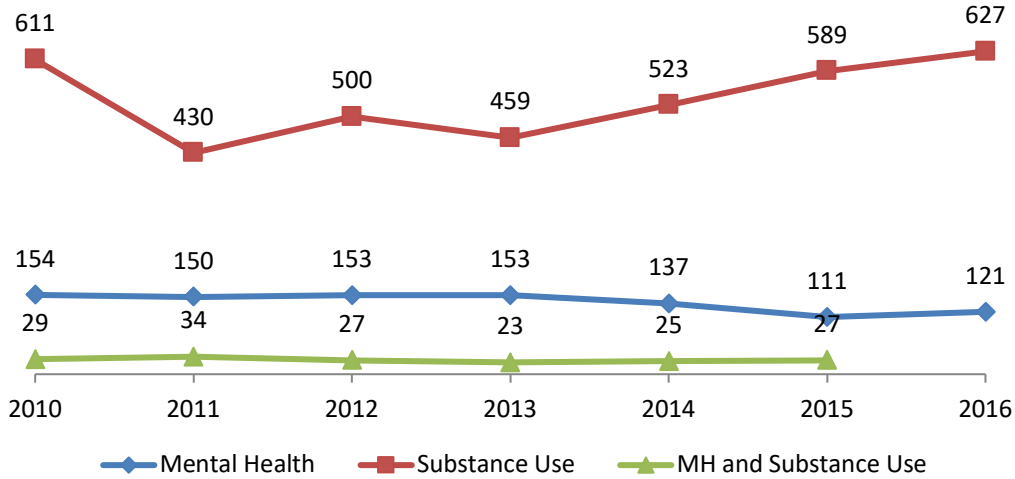
Despite increased services supported by Barnes Memorial Trust funding, focus group members and interviewees reported that there are still provider challenges including an insufficient number of mental health providers for children and youth (child psychiatrists and psychologists in particular) to meet the need and insurance limitations on the type and length of services that are covered by insurance. One consequence, according to participants, is that primary care physicians (PCPs) and school-based providers and staff are increasingly called on to provide more clinical-type services for behavioral health than they are trained for or comfortable with. Addressing mental health concerns in Southington was identified as a priority for THOCC in its 2018 community health improvement plan.¹⁷ To that end, the hospital is working to embed behavioral health into primary care, recruit more mental health providers for community outpatient services, provide more depression screening and Mental Health First Aid training, and expand virtual mental health services.

Perceptions about substance misuse in Southington were mixed. Some reported that this was not as pressing an issue as other community health concerns, while others reported that this was of high concern. The latter pointed to rising opioid overdoses in the community and those working in schools expressed concern about drinking and vaping among students and growing acceptance of marijuana in society. In addition to the positive impact made by Barnes investments in addressing substance use, focus group members and interviewees pointed to the HOPE (Heroin Opioid Prevention and Education) initiative involving the Southington Police Department, the work of Southington Youth Services and Southington STEPS particularly relative to asset-based youth development, and the town’s passage of Tobacco21 as additional examples.¹⁸

Little statistical information is available about substance use among Southington adults. Data shared in THOCC’s community health needs assessment indicate that 15.8% of Southington adults are current smokers and 22.2% reported binge drinking, both similar to rates for Connecticut overall.¹⁹ Data about the number of mental health and substance use admissions in Southington indicates that the number of admissions for substance use treatment among Southington residents has risen substantially between 2013 and 2016. (Figure 4)

¹⁶ Southington STEPS, Search Institute Report, 2018.
¹⁷ Hartford Healthcare, Central Region Update on Community Health Improvement Plan, June 2018. <https://hartfordhealthcare.org/File%20Library/CHNA/CHIP-2018-Central-Region.pdf>
¹⁸ This happened prior to the passage of the same legislation by the state of Connecticut.
¹⁹ Hartford Healthcare, *The Hospital of Central Connecticut Community Health Needs Assessment, 2018*. Southington includes Southington, Plainville, and Wolcott.

Figure 4. Number of Mental Health and Substance Use Treatment Admissions, Southington²⁰



Data about youth collected through the Southington STEPS initiative indicates that self-reported use of cigarettes and marijuana declined among Southington youth between 2012 and 2017. (Table 6)

Table 6. Self-reported substance use among youth, Southington.²¹

	Southington 2012	Southington 2017
Used alcohol at least once in the past 30 days	19%	18%
Smoked cigarettes at least once in the last 30 days	8%	2%
Used marijuana at least once in the last 30 days	13%	9%

Focus group members and interviewees were asked about areas of need related to behavioral health and where the Barnes Memorial Trust might be able to provide support. Suggestions included:

- *Continue to fund the Southington Health Outreach Project.* This Project was seen as an important resource to the community and as valuable in connecting residents to services and providers to one another. Focus group members and interviewees stressed that this work should continue.
- *Support programming that reaches transition-age youth.* Focus group members and interviewees identified transition-age youth (ages 20-25) as a group that is vulnerable to behavioral health issues and one that is also often less connected to natural supports

²⁰ Connecticut Department of Mental Health and Addiction Services data cited by the Connecticut Data Collaborative. Combined mental health and substance use treatment admissions for 2016 suppressed because there were fewer than 15 admissions.

²¹ Southington STEPS, *Search Institute Report, 2011-2012.*

(parents, schools, and primary care providers). Developing and supporting programs that reach these young people was seen as important and growing need; employers were mentioned as potential partners.

- *Continue to fund community-based behavioral health services:*
 - Focus group participants and interviewees saw a continuing need for the services currently provided by Barnes grantees working in behavioral health.
 - Support services such as recovery coaches who work with residents in the hospital after an overdose.
 - Fund peer support programs. This was seen as critical for students, particularly those who are more disengaged in school.
 - Expand the use of mental health and substance use screens in PCP offices.
 - Support programs that provide non-traditional mental health approaches such as yoga, art therapy, and music, and which are often not covered by insurance.
- *Continue to support professional development for school staff.* Recognizing the demands on school staff to work with and address the needs of students facing a variety of mental health challenges, some interviewees suggested that Barnes continue to support schools such as it is currently doing through support for the district-wide implementation of the RULER social-emotional intelligence initiative.
- *Consider whether Southington needs a Recovery Coalition.* A few focus group participants wondered whether the community could benefit from a town-level recovery coalition to coordinate at the systems level. An approach similar to the Opioid Task Force in Bristol was suggested and could complement the work of Southington STEPS which focuses on prevention.
- *Support efforts that raise awareness of behavioral health issues.* As in 2013, interviewees and focus group participants continue to see a need for educating parents and the public at large about behavioral health challenges facing the Southington community and how to prevent and address them.

Health and Healthcare Needs of an Aging Population

As described earlier, in 2013 demographic trends and feedback from interviewees and focus group participants pointed to the need to address the health and healthcare needs of an aging Southington population. As a result, this was identified as a priority funding area for the Barnes Memorial Trust in 2013; between 2013-2019, over \$2 million in grant funding was focused on this area. Successes in this area to date include:

- *Creation of the Dementia Friendly Southington Initiative.* This community-wide initiative focuses on raising awareness of and support for community members with dementia and their families. The Initiative has convened an Action Team, trained champions, conducted public education, implemented training for employees of businesses, organizations, and faith communities, and provided support and resources for those living with dementia and their caregivers.
- *Increased access to transportation for Southington seniors.* With support from the Barnes Memorial Trust, the United Way's Senior Transportation Services has been able to increase access to free transportation for Southington seniors. Between 2017 and

2019, the number of rides provided has increased by over 400% from 253 to 1,325, averaging about 150 rides per month.

- *Development and expansion of Hope Full Lives.* Barnes Memorial Trust funding helped the LiveWell Alliance to develop and expand a community-based program that supports caregivers and people living with the early signs of dementia. The program has served hundreds of Southington residents and resulted in documented increases in caregiver knowledge and decreases in caregiver stress. The program launched reimbursable services and recently received 3-year funding for the project as part of an Administration on Community Living Alzheimer's Disease Program Initiative (ACL-ADPI).
- *Expanded fitness programming for seniors.* Programmatic and capital support to the YMCA enabled the launch of EnhanceFitness, an evidence-based group exercise program for individuals with arthritis and enabled Mulberry Gardens to expand the Good Life Fitness program.
- *Support for capital investments that improve health and social services for seniors.* These investments have included an elevator to increase seniors' and others' access to the YMCA's pool, renovation of the Southington Care Center's garden lounge and patio garden to make it more inviting for over 450 Southington seniors with dementia, and implementation of an electronic medical records (EMR) system for Central Connecticut Senior Health Services.
- *Increased access to audiological care and equipment.* A new partnership with Easterseals of Greater Waterbury is helping to address hearing loss challenges for Southington residents with financial need.

Focus group members and interviewees stressed the need to continue to address the needs of Southington's older and aging residents. They valued Barnes Memorial Trust investments in this priority area, pointing particularly to the establishment of the Dementia Friendly Initiative and its community-wide focus and transportation services to help to ensure that seniors are not isolated in their homes. Participants saw a need to continue these services, as well as those that support seniors to "age in place." They additionally reported that more work is needed to identify and reach isolated seniors; focus group members and interviewees shared that current services do not reach this population and depression and self-neglect is high among these seniors.

Participants in focus groups and interviews, including seniors themselves, noted that many seniors live on fixed incomes and face financial challenges, especially as they are living longer. They mentioned struggles with healthcare costs that are not covered by Medicare including dental, hearing, and vision care. Some seniors reported challenges paying for medication. Affording dental care was reported to be challenging and several interviewees and focus group members reported that finding dental providers to serve lower income residents is challenging. The cost of housing in Southington—while an issue across the community—was seen as particularly challenging for seniors because of the lack of affordable senior housing and long wait lists for this housing. Finally, while Southington was described as having substantial social

services for community members, the income eligibility requirements to receive low cost or free services were described by some as “too low” leaving many low-income seniors ineligible.

When asked about areas in which Barnes Memorial Trust funding could be beneficial to address the health and healthcare needs of aging Southington residents, focus group members and interviewees suggested:

- *Continue to fund the Dementia-Friendly Southington Initiative.* This community-wide initiative was seen as highly successful in creating community-level awareness and support for those living with dementia and their families.
- *Continue to fund transportation for seniors.* These services were valued by seniors and social service providers alike as a strategy to support seniors to age in place, access needed health and social services, and reduce isolation. The rapid expansion of these services in the past few years was seen as an indicator of how important free transportation services are to Southington’s seniors.
- *Build a community-wide stakeholder group.* Social service providers suggested that Barnes Memorial Trust consider supporting the formation of a stakeholder group working on aging issues in Southington to support information sharing and collaboration, similar to the Southington Health Outreach Project group currently supported by the Trust.
- *Identify ways to reach isolated seniors.* Focus group members and interviewees saw a need to identify isolated seniors and develop ways to reach them with services and supports. One person suggested funding for a program to check in on people (“senior watch”) while another saw engagement of resident coordinators at senior housing as key to this.
- *Program to provide financial assistance for healthcare costs.* Dental care and hearing and vision services were seen as critical for good health but are often not covered by Medicare or Medicaid. While acknowledging that long-term sustainability would be challenging, several focus group members and interviewees wondered whether Barnes Memorial Trust could provide funding for a financial assistance program to help low-income seniors to pay for these types of health costs.
- *Consider ways to expand dental services for lower income residents.* Suggestions included mobile dental services or establishment of a dental clinic satellite in the community.
- *Provide support for programming that helps seniors to “age in place.”* Several participants mentioned the need to support services for seniors including: home health services; local, short-term therapeutic beds; and efforts that enhance telemedicine.

Integrated Health and Healthy Lifestyles

While Integrated Health was identified as a priority for the Barnes Memorial Trust in 2013, proposals for this were not submitted. Thus, the priority area was expanded in 2016 to also include healthy lifestyles, another area identified as a priority in the 2013 health assessment. To date, the Barnes Memorial Trust has provided over \$570,000 in grants to support this priority area. Key areas of success to date include:

- *New diabetes prevention program.* Barnes Memorial Trust funding helped the YMCA to launch a diabetes prevention program.
- *Programs to address food insecurity.* Grants helped Bread for Life to expand a weekly meal program and purchase a commercial refrigerator and freezer and created a new partnership with The L.E.A.F. to ensure a healthy and sustainable food supply in Southington.
- *Educational workshops for parents and caregivers of young children.* Funding for the Early Childhood Collaborative of Southington has helped the organization to provide parent and caregiver training in areas of safety, nutrition and fitness, and social-emotional learning.
- *Capital investments to support healthy lifestyles.* Barnes Memorial Trust grants have improved YMCA's Camp Sloper and enabled renovation of office space and a bathroom at Arc of Southington.
- *Support for Hartford Healthcare's Healthy Family FunFest.* Grant support for this annual event brings partners together to provide the community with information, screenings and other resources to improve their overall health.

When asked about obesity in the community, some interviewees and focus group participants identified this as a health concern, especially among children and youth, while others did not. According to data shared in THOCC's community health needs assessment, 32.5% adults in Southington are a healthy weight (compared to 38.6% in Connecticut) and 24.4% get no leisure time physical activity (compared to 23.2% for the state).²² Activate Southington was mentioned by numerous participants as a successful local initiative to promote healthy lifestyles. The Barnes Memorial Trust has recently supported the Early Childhood Collaborative of Southington to share the evidence-based 5-2-1-0 program to promote healthy well-being among children. Food insecurity was identified as an issue for some in Southington, especially those who do not have transportation and seniors who are home bound. While Southington does have food pantries, a few focus group members and interviewees mentioned that their selections of fresh and healthy foods is limited.

Supporting healthy behaviors was identified as a priority area for the Hospital of Central Connecticut in its recent community health improvement plan, including increasing access to healthy food through partnership with food pantries, gardens, and mobile food programs.²³ Focus group members and interviewees participating in this study provided a few suggestions for additional programming in healthy living. These include:

- *Support a pantry that has paper goods, paper towels, bath tissue, napkins.* One focus group member saw a need for a "paper good" pantry, as these items cannot be purchased with food stamps.

²² Hartford Healthcare, *The Hospital of Central Connecticut Community Health Needs Assessment, 2018.* Southington includes Southington, Plainville, and Wolcott.

²³ Hartford Healthcare, Central Region Update on Community Health Improvement Plan, June 2018. <https://hartfordhealthcare.org/File%20Library/CHNA/CHIP-2018-Central-Region.pdf>

- *Support programs that do health promotion.* One person suggested working with activity directors/resident coordinators at senior housing to enhance programming around healthy lifestyles and ensure outreach to those seniors who are more isolated.

Accessibility and Affordability of Healthcare

In 2013, implementation of the Affordable Care Act (ACA) and Medicaid expansion were just beginning and it was unclear how healthcare access would be affected. Barnes Memorial Trust funding in this area has been limited. Between 2013 and 2019, the Barnes Memorial Trust has invested about \$540,000 in three projects that have addressed access to and affordability of healthcare including the Southington Health Outreach Project, the senior transportation program, and THOCC's opening of a behavioral health clinic in the community. These have all been described earlier in this report because they also address other Trust priority areas.

When asked about healthcare in the community, focus group members and interviewees generally reported that Southington residents have good access in the sense that there are primary care providers as well as specialists. Numerous participants mentioned the ongoing conversation about the future of THOCC's Bradley Memorial campus and specifically emergency services, noting that decisions about these will affect the healthcare landscape in the community. Additionally, three trends related to healthcare were mentioned. First, the healthcare workforce in Southington is aging; notably, several pediatricians and PCPs are retiring or will soon retire. Second, focus group members and interviewees expressed concern about healthcare-related costs such as co-pays, medications, skilled nursing, as well as costs associated with dental, vision, and hearing care, which are often not covered by Medicare or Medicaid. Finally, as identified in 2013, navigating the healthcare and insurance systems is challenging and is made even more difficult as healthcare moves away from in-patient services to ambulatory care. THOCC's 2018 community health needs assessment identified additional challenges including lack of care coordination, not enough providers who accept Medicaid, limited dental care access, and challenges with translation services and cultural sensitivity of health care providers.

Quantitative data indicate that a lower proportion of Southington adults (3.4%) were uninsured in 2013-2017 compared to the state of Connecticut (6.4%).²⁴ Data from the 2015 Connecticut DataHaven Community Wellbeing Survey show that 92% of Southington residents have one person or place that they think of as their personal doctor of healthcare provider, compared to 86% for the state overall. According to survey results, 5% of Southington adults reported that there was a time in the prior 12 months when they needed healthcare but did not get it and 21% reported that they delayed getting healthcare they thought they needed, both rates similar to the state overall. Data about prevention among Southington adults show that rates

²⁴ Connecticut Data Haven. <https://www.ctdatahaven.org/profiles/southington>

for routine health check-ups (88.8%), flu vaccination (45.0%), and pneumococcal vaccination (75.1%) in the community are slightly higher than for the state overall.²⁵

Interviewees and focus group members provided a few suggestions for how the Barnes Memorial Trust could support healthcare access and affordability:

- *Support efforts that help patients navigate healthcare.* A couple of focus group members and interviewees suggested a need for more consumer education about how healthcare works and is changing. A few saw a need for more patient advocacy, including more care coordination and follow up.
- *Program to provide financial assistance for healthcare costs.* As described above in the discussion about health and healthcare for seniors, some saw a need for a program to help low-income residents cover their healthcare costs, especially for services not usually covered by insurance.

Cross-Cutting Concerns

Several cross-cutting themes also emerged that may have implications for Barnes Memorial Trust grantmaking:

- *Social determinants of health: Housing and transportation.* As in the 2013 assessment, focus group members and interviewees in 2019 reported that both transportation and housing continue to be challenges for the Southington community. Lack of affordable housing was frequently mentioned in focus groups and interviews; this was similarly noted as a challenge in THOCC's community health needs assessment. Seniors and senior services providers noted that affordable and appropriate housing for seniors was particularly challenging. Respondents recognized that addressing affordable housing issues in the community would require systemic change but did not necessarily see the Barnes Memorial Trust as leading on this issue. Transportation continues to be challenging for some Southington residents, as it was in 2013, although Barnes Memorial Trust support for Senior Transportation Services has helped to address some of this need.
- *Anticipated pressures on nonprofit operating costs.* One theme that emerged in conversations with community-based providers is the implication of the rising minimum wage on the operational costs of nonprofits. Nonprofit leaders noted that they expect to see substantial increase in operating costs over the next several years as the minimum wage is scaled up. They do not expect concurrent increases in public reimbursement to help organizations to meet these costs and most community nonprofits do not receive operational funding from foundations that could cover the increased expenses. They expressed concern about meeting these costs while at the same time continuing to fund operational costs such as technology, safety, and insurance, and to provide high quality services.

²⁵ Hartford Healthcare, *The Hospital of Central Connecticut Community Health Needs Assessment, 2018*. Southington includes Southington, Plainville, and Wolcott.

- *Lack of public awareness of Southington’s challenges.* Southington was described by numerous respondents as a wonderful and generous community; however, people also shared that community members may not always recognize that there are also challenges. Several focus group members and interviewees suggested that more could be done to raise awareness of community issues—especially as they relate to youth.
- *Southington has many services, but some are not aware of these.* As was the case in 2013, focus group members and interviewees in 2019 described Southington as a community with many services. However, there are community members who are not aware of these services and could benefit from them. Participants praised the directory of mental health and substance use services produced by the Barnes-funded Southington Health Outreach Project. They saw a need for ongoing information about the various services available in the community. Suggestions included a centralized directory (online and in print) as well as advertising in newsletters, and local papers. Participants also saw libraries, faith institutions, and housing authorities as partners to disseminate information about community resources.

Conclusion

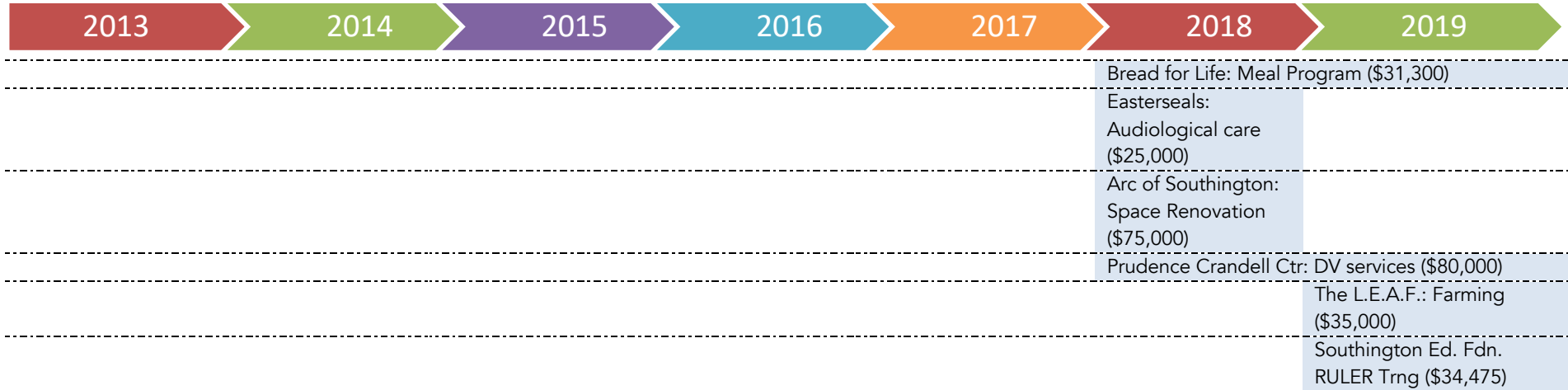
In 2013, the Barnes Memorial Trust of the Main Street Community Foundation began a community-based grantmaking program to support capital improvements and programmatic activities that promote the health and healthcare needs of Southington residents. At that time, the Barnes Memorial Trust Advisory Committee identified four priority areas for investment: Accessibility and Affordability of Healthcare; Substance Use and Mental Health; Health and Healthcare Needs for an Aging Population; and Better Integrated Healthcare.

This report examines progress made in these four priority areas between 2013 and 2019. It also presents qualitative and quantitative data about current needs in these areas. The Barnes Memorial Trust Advisory Committee will use this analysis to refine its strategy for the next few years, including establishing new priority areas and/or expanding existing ones.

APPENDIX A: Barnes Memorial Trust Grantmaking by Organization by Years

2013	2014	2015	2016	2017	2018	2019
Hospital of Central CT: Echocardiograph (\$141,475)		Hospital of Central CT: Glidescope (\$25,860)			Hospital of Central CT: Behavioral Health Clinic (\$54,000)	
Central CT Senior Health Services: EMR (\$188,063)						
Southington-Cheshire YMCAs: Pool Elevator (\$430,000)		Southington-Cheshire YMCAs: Enhance Fitness Prg (\$32,103)	Southington-Cheshire YMCAs: Fitness Trail (\$62,500)		Southington-Cheshire YMCAs: Diabetes Prevention Program (\$48,130) (2018-2019)	Southington-Cheshire YMCAs: Splash Pad (\$200,000 ²⁶)
	LiveWell Alliance: HopeFull Lives Program (\$260,000)					
	Wheeler Clinic: Southington Health Outreach Project (\$438,075)					
		Southington Community Arts Center: All Access Program (\$505,200)				
		Hartford Healthcare at Home: Integrated Care for Seniors (\$280,000)				
		HAVEN: Case Management Services (\$139,000)		Symposium (\$35,000)		
			Hartford Healthcare Senior Services: Caregiver Training (\$93,682)			
				LiveWell Alliance: Dementia Friendly Southington Initiative (\$345,500)		
				United Way of Southington: Senior Transportation Program (\$139,393)		
				Living in Safe Alternatives: 1-2-3 Prevention, Intervention, and Recovery Program (\$124,420)		
				Early Childhood Coll. of Southington: Well-Being Initiative for Young Children (\$73,150)		
				Mulberry Gardens: GoodLife Fitness Program (\$67,079)		
					Hartford Healthcare Senior Services: Renovation of SCC (\$150,000)	

²⁶ \$100,000 of this award to be paid in 2020.



APPENDIX B: Summary of Barnes Memorial Trust Grantmaking 2013-2019

Project (Grantee)	Purpose	Amount (Years)
HEALTH/HEALTHCARE NEEDS OF AN AGING POPULATION		
Echocardiograph (Hospital of Central CT)	Purchase portable echocardiograph for Bradley Memorial campus cardiology department.	\$150,000 (2013)
EMR system (Central CT Senior Health Services)	Purchase of software and hardware to implement EMR system to support the healthcare needs of Southington residents in 3 senior living communities, adult daycare, and at the Connecticut Center for Healthy Aging.	\$185,000 (2013)
Elevator for Pool (Southington-Cheshire Community YMCAs)	Elevator to increase access to YMCA pool to expand capacity to provide aquatic classes and increase seniors' participation in classes and use of the pool.	\$430,000 (2013 & 2014)
Hope Full Lives Caregiver Training Program (LiveWell Alliance, Inc)	Implementation of Hope Full Lives, a community-based program designed to increase the positive mental health and well-being of caregivers and people living with the early symptoms of dementia by decreasing stress, depression, anxiety, and caregiver burden and increasing respite and meaningful community engagement opportunities.	\$260,000 (2014-2017)
EnhanceFitness Program (Southington-Cheshire Community YMCAs)	Launch of EnhanceFitness, an evidence-based group exercise program for individuals with arthritis and purchase of ergometer and elliptical bike.	\$32,103 (2015)
Dementia Training (Hartford Healthcare Senior Services)	Build organization's capacity to provide care to those with dementia through training to clinical and non-clinical staff. Develop a Dementia Resource Library and Dementia Resource Guides. Enable purchase of communications equipment to support short-term residents transitioning back to community and family-patient communication.	\$93,682 (2016 & 2017)
Integrated Care for Southington Seniors (Hartford HealthCare at Home)	Establish an integrated care approach to senior healthcare that includes a geriatrician, geriatric pharmacist consultation, behavioral health specialist services, and a telemonitoring program.	\$280,000 (2015-2017)
Good Life Fitness Program (Mulberry Gardens of Southington)	Improve Good Life Fitness program, a fitness program for the seniors at Mulberry Gardens through purchase of equipment and space renovation.	\$67,079 (2017)
Dementia Friendly Southington Initiative (LiveWell Alliance, Inc)	Plan and implement the Dementia Friendly Southington Initiative, a grassroots community-based approach to foster a "dementia-friendly" community, in collaboration with Dementia Friendly America (DFA). Convene an Action Team, train champions, conduct public education, implement training for employees of businesses, organizations, and faith communities, and provide support and resources for those living	\$345,500 (2017-2019)

Project (Grantee)	Purpose	Amount (Years)
	with dementia and their caregivers.	
Senior Transportation Program (United Way of Southington)	Fund transportation program in collaboration with Senior Transportation Services of New Britain. Service is free to Southington residents age 55+ who need rides to medical appointments, pharmacy, hairdresser, bank, or care facility. Rides are provided by trained volunteers.	\$139,393 (2017-2019)
Audiological treatment and equipment (Easterseals of Greater Waterbury)	Audiological care and equipment to Southington residents with demonstrated financial need.	\$25,000 (2018)
Renovation of Southington Care Center (Hartford Healthcare Senior Services)	Renovation of Southington Care Center indoor garden lounge and outdoor patio garden to make it more inviting and less institutional for over 450 Southington seniors with dementia and improve SCC's ability to provide small-group programming.	\$150,000 (2018 & 2019)
MENTAL HEALTH AND SUBSTANCE USE		
Southington Health Outreach Project (Wheeler Clinic)	Implement new project to enhance access to mental health and substance use programs by: convening a quarterly stakeholder group to enhance collaboration among organizations; holding outreach hours for residents throughout Southington; providing community training; producing and updating a behavioral health directory; and educating the public through participation in community events.	\$438,075 (2014-2019)
Case management for healthcare professionals. (Health Assistance InterVention Education Network-HAVEN)	Enhance case management services for healthcare providers for professionals living or working in Southington.	\$139,000 (2015 & 2016)
All Access Program (Southington Community Cultural Arts Center)	Create and expand the All Access Program that connects adults with disabilities to their community through the creative process, encourages self-confidence through self-expression and enhances participants' quality of life. Barnes support has also helped with capital improvements including construction of an elevator (2015), purchase of Macintosh IT equipment and materials for screen printing (2018), and purchase of accessible pottery wheel and expenses related to ADA-compliant bathroom (2016).	\$505,200 (2015-2019)
Symposium on addiction and compulsive behavior (Health Assistance InterVention Education Network-HAVEN)	Professional development symposium on addiction and compulsive behavior. Funding to provide free admission to Southington residents to symposium.	\$35,000 (2017)
Behavioral Health Clinic (The Hospital of Central CT)	Convert office space into behavioral health clinic.	\$54,000 (2017)

Project (Grantee)	Purpose	Amount (Years)
1-2-3 Prevention, Intervention, and Recovery Program (Living in Safe Alternatives-LISA Inc.)	Implement 1-2-3 Prevention, Intervention, and Recovery Program to identify and target youth and adults at risk of use, or who are currently using, increase stress management, coping abilities, and refusal skills among participants, and increase parents' ability to support recovery efforts of their children and educators' understanding of how to identify potential issues and address accordingly. Provide educator workshops and parent outreach and individual and group support using evidence-based programs.	\$124,420 (2017-2019)
Domestic violence services. (Prudence Crandall Center)	Provide domestic violence intervention and prevention services including 24-hour crisis line and emergency shelter, counseling services and support groups, and education in schools and the community.	\$80,000 (2018 & 2019)
RULER Training and Materials (Southington Education Foundation for the Southington Public Schools)	Support professional development and materials related to district-wide implementation of RULER social-emotional intelligence initiative for staff working in PreK-12 Southington classrooms.	\$34,475 (2019)
AFFORDABILITY AND ACCESSIBILITY OF HEALTHCARE		
Southington Health Outreach Project (Wheeler Clinic)	Training, information resources, and referrals for behavioral health concerns. <i>Further described in Mental Health and Substance Use section.</i>	\$438,075 (2014-2019)
Senior Transportation Program (United Way of Southington)	Senior transportation program. <i>Further described in Aging Population section.</i>	\$139,393 (2017-2019)
Behavioral Health Clinic (The Hospital of Central CT)	Convert office space into behavioral health clinic. <i>Further described in Mental Health and Substance Use section.</i>	\$54,000 (2017)
INTEGRATED HEALTHCARE & HEALTHY LIFESTYLES		
Community Well-Being Initiatives for Southington's Young Children (Early Childhood Collaborative of Southington)	Provide educational workshops for parents and caregivers in topics such as bike and car seat safety, nutrition and fitness, special needs and developmental delays, social-emotional learning, and support for grandparents through a Facebook group.	\$73,150 (2017-2019)
Camp Sloper Capital Improvements (Southington-Cheshire Community YMCAs)	Install splash pad and bathroom/changing room and improvement of trail and create fitness stations at Camp Sloper. Leveraging \$3,700,000 in state bond funding, grants and fundraising for splash pad.	\$262,500²⁷ (2016 & 2019)
Diabetes Prevention Program (Southington-Cheshire Community YMCAs)	Launch new diabetes prevention program and purchase of related equipment.	\$48,130 (2018 & 2019)

²⁷ \$100,000 of this award to be paid in 2020.

Project (Grantee)	Purpose	Amount (Years)
Food Program (Bread for Life)	Expand weekly meal program and purchase commercial refrigerator and freezer and AED for emergencies.	\$31,300 (2018 & 2019)
Renovation (Arc of Southington)	Renovate office space in Southington to add large conference room space and make the bathroom ADA compliant to enable organization to provide more training and offer use of space to other community organizations. Leveraging \$507,000 in State of CT Nonprofit Program funding.	\$75,000 (2018)
Food Program (The L.E.A.F.)	Support labor and purchase materials for programs in schools to ensure a healthy and sustainable food supply in Southington.	\$35,000 (2019)
Healthy Family FunFest (Hartford Healthcare Senior Services)	Sponsorship for annual Healthy Family FunFest.	\$45,880 (2014-2018)
OTHER		
Feasibility Study (Hartford Healthcare)	Seed money for a study by a leading healthcare strategy firm to assess the options that will create a sustainable plan for the Bradley Memorial campus.	\$100,000 (2014)
Glidescope (The Hospital of Central CT)	Purchase glidescope for Bradley Memorial Campus Emergency Department to enhance capability of the emergency department to secure emergent, especially difficult, airways in adults and children.	\$25,860 (2015)
Community sponsorships	Six community sponsorships.	\$8,750 (2018 & 2019)

APPENDIX C: Focus Group Participants and Interviewees

Focus Group Members

Senior Focus Group: 10 seniors, Calendar House

Southington Mental Health and Substance Use Focus Group:

- Jackie Alpert, Director of Community-based Programs, LISA, Inc.
- Jessica Collins, R.N., Regional Director of Behavioral Health, The Counseling Center, The Hospital of Central Connecticut
- Justine (Micalizzi) Cornelio, Senior Community Health Outreach Coordinator, Wheeler Clinic
- Barbara Damon, Executive Director, Prudence Crandall Center
- Mary DeCroce, Executive Director, SOCCA
- Liz Hyatt, Associate Director of Development, LISA, Inc.
- Kelly Leppard, Youth Prevention Coordinator; S.T.E.P.S. Liaison, Southington Youth Services
- Michelle Neilsen, Vice President of Finance, HAVEN, Inc.
- Courtney Pope, Director of Behavioral Health for Wheeler's Bristol Health and Wellness Center, Wheeler Clinic
- Christina Simms, Director, Southington Youth Services
- Maureen Sullivan Dinnan, C.E.O., HAVEN, Inc.
- Elizabeth Szymanoski, Philanthropy Manager, Hartford HealthCare Central Region

Southington Aging Population Focus Group:

- Leann Blanchard, Executive Director, The Orchards at Southington
- Jack Eisenmann, Executive Director, United Way of Southington
- Jacquelyn Gaulin, Executive Director, Mulberry Gardens
- Michelle Lavoie, Resource Coordinator HHC Center for Healthy Aging, Hartford HealthCare Senior Services
- Wendy Martinson, Director HHC Center for Healthy Aging, Hartford HealthCare Senior Services
- Nancy Morrissey, Executive Director, Senior Transportation Services
- Julie Norko, Regional Director of Assisted Living Operations, Hartford HealthCare Senior Services
- Katy O'Leary, Director of Community Development, LiveWell Alliance
- Michael Smith, President & C.E.O., LiveWell Alliance
- Vinnie Tranquilli, Community Services Aide, Southington Community Services
- Vicky Triano, Chaplain, Southington Care Center

Southington Integrated Health and Healthy Lifestyles Focus Group:

- Sandra Amato, Executive Director, Arc of Southington
- Donna Ayer, Executive Director, Bread for Life

- Missy Cipriano, Volunteer Services, Bread for Life
- Joanne Kelleher, Executive Director, Early Childhood Collaborative
- Dawn Miceli, Chairperson, Southington Chamber of Commerce
- Mark Pooler, C.E.O., Southington-Cheshire Community YMCA's
- Loraine Shea, President & CEO, Easterseals Greater Waterbury
- Isaiah Worley, Co-chair Southington Chamber Health comm., Southington Chamber of Commerce

Interviewees:

- Rev. Ron Brown, First Congregational Church
- Timothy Connellan, Superintendent, Southington Public Schools
- Lynn Faria, Community Relations Director, Central Region, The Hospital of Central Connecticut
- Gary Havican, President, The Hospital of Central Connecticut
- Stephen Heermance, Associate Pastor, Faith Baptist Church
- Shane Lockwood, Director of Health, Plainville-Southington Regional Health District
- Janet Mellon, Director, Southington Community Services
- David Obedzinski, President, Community Foundation of Greater New Britain
- Mark Sciota, Town Manager, Town of Southington
- Margaret Walsh, Director of Pupil Services, Southington Public Schools

APPENDIX D: Southington Focus Group Protocols

SOUTHINGTON FOCUS GROUP PROTOCOL—SENIORS

1. So let me start off by asking you what you think are the biggest health concerns for seniors in Southington. [List these on flip chart, group where appropriate]
2. I'd like to go through the things on this list and talk about them. [For each item]:
 - a. Tell me a little about what is challenging about this for seniors.
 - b. How many/which seniors does this affect?
 - c. Are there any services in place currently that address this? Which? How effective do you think they are?
 - d. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?

IF NOT ALREADY DISCUSSED, ask about:

- Mental health
- Substance use
- Healthy lifestyles
- Access to care including available services, obtaining health insurance, medication costs, navigating health systems/health insurance [spend some time really exploring what is needed around this if identified as important]
- Caregiver supports
- Social determinants of health: housing, transportation, food security

3. Is there anything else that is missing from our list?

FOCUS GROUP PROTOCOL—SENIOR SERVICES

1. I'd like to start off by asking you what you currently see as the biggest health concerns for seniors and their families in Southington. [List these on flip chart, group where appropriate]
2. I'd like to go through the things on this list and talk about them. [For each item]:
 - a. Tell me a little about what is challenging about this for seniors.
 - b. How many/which seniors does this affect?
 - c. Are there any services in place currently that address this? Which? How effective do you think they are? [where appropriate, mention activities the Trust has funded, ask whether these are sufficient or what else is needed]
 - d. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?
 - e. What role do you think the Barnes Memorial Trust could play relative to these services?

After this set of questions, if not mentioned, ask this same set of questions about:

- Mental health issues
- Substance use concerns
- Access to care: availability, affordability, accessibility, including obtaining health insurance, medication, navigating health systems/health insurance
- Caregiver supports
- Healthy lifestyles

3. [If not already discussed] I'd like to spend a few minutes talking about those contextual or "upstream" factors that affect health. These are often called the social determinants of health and include things like transportation, housing, income and employment, and food security. Are any of these social determinants of health of concern to seniors in Southington? (put on flip chart)
 - a. Tell me a little about what is challenging about this for seniors.
 - b. How many/which seniors does this affect?
 - c. Are there any services in place currently that address this? Which? How effective do you think they are?
 - d. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?
 - e. What role do you think the Barnes Memorial Trust could play relative to these services?
4. We've covered a lot today. Is there anything else that you want to share?

FOCUS GROUP PROTOCOL—MENTAL HEALTH AND SUBSTANCE USE SERVICES PROVIDERS

1. I'd like to start off by getting more specific about mental health and substance use concerns in Southington. Let's start with mental health. What do you see as the specific mental health concerns in the community? [List these on flip chart, group where appropriate]
2. I'd like to go through the things on this list and talk about them. [For each item]:
 - a. Are there specific groups of people who are more affected by this concern than others?
 - b. Are there any services in place currently that address this? Which? How effective do you think they are? [where appropriate, mention activities the Trust has funded, ask whether these are sufficient or what else is needed]
 - c. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?
 - d. What role do you think the Barnes Memorial Trust could play relative to these services?

3. Let's go through the same process with substance use. What do you see as the specific substance use concerns in the community? [List these on flip chart, group where appropriate]
4. I'd like to go through the things on this list and talk about them. [For each item]:
 - a. Are there specific groups of people who are more affected by this concern than others?
 - b. Are there any services in place currently that address this? Which? How effective do you think they are? [where appropriate, mention activities the Trust has funded, ask whether these are sufficient or what else is needed]
 - c. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?
 - d. What role do you think the Barnes Memorial Trust could play relative to these services?
5. [LAST FEW MINUTES, IF TIME] We're not going to be able to go into depth, but I would be curious to know what you think are other pressing health concerns in the community. [IF NOT DISCUSSED, ask about social determinants.]
6. We've covered a lot today. Is there anything else that you want to share?

FOCUS GROUP PROTOCOL—INTEGRATED HEALTH AND HEALTHY LIFESTYLES

1. I'd like to start off by talking about healthy behaviors and healthy lifestyles among Southington residents. To what extent do you think Southington residents engage in healthy lifestyles? What do you think makes it difficult for residents to engage in healthy lifestyles? [List these on flip chart, group where appropriate]
2. I'd like to go through the things on this list and talk about them. [For each item]:
 - a. Are there specific groups of people for whom this is more of a barrier than others?
 - b. Are there any services in place currently that address this? Which? How effective do you think they are? [where appropriate, mention activities the Trust has funded, ask whether these are sufficient or what else is needed]
 - c. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?
 - d. What role do you think the Barnes Memorial Trust could play relative to these services?
3. [IF NOT ALREADY DISCUSSED] I'd like to spend a few minutes talking about those contextual or "upstream" factors that affect health. These are often called the social determinants of health and include things like transportation, housing, income and

employment, and food security. Are any of these social determinants of health of concern to Southington residents? (put on flip chart)

- a. Tell me a little about what is challenging about this for residents.
- b. Which residents does this affect?
- c. Are there any services in place currently that address this? Which? How effective do you think they are?
- d. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?
- e. What role do you think the Barnes Memorial Trust could play relative to these services?

4. We've covered a lot today. Is there anything else that you want to share?

APPENDIX E: Southington Interview Protocol

1. Let me start off by asking you what you think are the biggest health concerns for residents in Southington.
2. I'd like to go through the things on this list and talk about them. [For each item]:
 - a. Tell me a little about what is challenging about this health concern.
 - b. Who in the community is most affected by this health concern?
 - c. Are there any services in place currently that address this? Which? How effective do you think they are?
 - d. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?

IF NOT ALREADY DISCUSSED, ask about:

- Mental health
 - Substance use
 - Healthy lifestyles
 - Senior health
 - Access to care including available services, obtaining health insurance, medication costs, navigating health systems/health insurance [spend some time really exploring what is needed around this if identified as important]
3. [IF NOT ALREADY DISCUSSED] I'd like to spend a few minutes talking about other factors that can affect people's health. These include things like transportation, housing, income and employment, and food security. Are any of these of concern to residents in Southington? (put on flip chart)
 - a. Tell me a little about what is challenging about this.
 - b. Are there any services in place currently that address this? Which? How effective do you think they are?
 - c. What's missing in terms of services to address this health concern? What would these services look like? Who would provide them?