

February 23, 2021

Mr. Tom Donovan
NH Charitable Trust Division
NH Department of Justice
33 Capital Street
Concord, New Hampshire 03301

RE: NAMI NH Testimony on Concord Hospital - LRGH Merger

Dear Tom,

My name is Kenneth Norton, and I am the Executive Director of NAMI NH, the National Alliance on Mental Illness. Our mission is to improve the lives of all people impacted by mental illness and suicide through support, education, and advocacy. I am a resident of Tilton and have utilized Concord Hospital's emergency department for a mental health emergency for a family member in the past. In the interest of full transparency, I have also served as community representative on Concord Hospital's Medical Ethics Committee. I am speaking on behalf of NAMI NH.

On numerous occasions, including at his budget address on February 11, Governor Sununu has stated that NH is in the midst of a mental health crisis. This crisis existed prior to COVID-19 but has certainly worsened as a result of the pandemic. Nationally, as well as locally, we are seeing increased stress, anxiety, and depression across all ages. However, it is hitting children and older adults especially hard. As we look toward the future, it is hard to predict either the short-or long-term impact of the pandemic on mental health.

The most visible symptom of New Hampshire's mental health crisis is the practice of emergency department (ED) boarding: holding people in a mental health crisis for days and weeks at a time while awaiting in-patient care; an inhumane practice which NAMI NH has described as wrong medically, legally, ethically, morally, and economically.

During the past several weeks, New Hampshire has exceeded previous records of people being boarded in emergency departments including 51 children on February 14th and a one-day combined total of adults and kids of 86 at the end of January.

ED boarding is the tip of the iceberg, with many people needing mental health services often having to wait months for an outpatient appointment; if they can get one at all.

It is with this backdrop that NAMI NH is particularly concerned about hospital mergers and acquisitions. Hospitals are no longer just the brick building on the hill, but now serve as health care systems providing extensive outpatient services as well.

Part of the challenge of ED boarding is that many inpatient voluntary units have closed for a variety of reasons. One example of this is the gero-psych unit at LRGH which was closed in April of 2020. On any given day, a significant number of older adults are being boarded in ED's.

Concord Hospital has been a leader in the provision of MH care — as demonstrated by its continued operation of the voluntary inpatient psychiatric unit, as well as through the volume of patients that come to their emergency room in a mental health crisis. Though at times we hear concerns about the conditions in the yellow pod (special section of the ED for MH patients) as we do about most hospitals boarding patients in ED's. It is also notable that I have heard the statistic that as many as 40% of the people who seek MH care in their ED are not from their region. It is clear Concord Hospital has maintained their commitment to people with mental illness even in the face of what are significant financial challenges. Concord Hospital also provides important outpatient services such as Electroconvulsive Therapy (ECT) and has integrated physical health and mental health programs. They do this in close collaboration with Riverbend. Having the Riverbend CEO also serve as Concord Hospital's Vice President of Behavioral Health ensures there is a close connection between Concord Hospital and community-based mental health services.

Franklin Hospital operates a 10-bed Designated Receiving Facility (DRF) – meaning it can accept involuntary patients. It is currently the northernmost DRF in the state.

It is imperative that as a result of this merger, we not lose any inpatient capacity either at Concord or Franklin and our hope is that serious consideration will be given to reopening the gero-psych unit at LRGH.

It is also critically important that Laconia, Franklin, and surrounding communities continue to have local access to comprehensive community-based mental health services. While COVID has opened the door for telehealth – which is wonderful, it is not a replacement for local services particularly for vulnerable populations of people who often don't have access to reliable transportation or even internet services.

Though we have not specifically addressed treatment for substance misuse and addiction, those are also important especially for those individuals with co-occurring mental illness and substance use disorders.

NAMI NH's hope is that if this merger occurs, Concord Hospital would develop a strong partnership with the Lakes Region Mental Health Center along the lines of the collaboration and partnership it has with Riverbend.

Additionally, community-based services and especially emergency mental health crisis response will be especially important as New Hampshire moves forward with operationalizing the federal three-digit 988 suicide prevention/mental health crisis line according to the federal implementation date of July 2022. While Concord has mobile crisis response and a walk-in mental health crisis care center, it will be important for mobile crisis and other related crisis mental health care to be expanded to the regions which LRGH and Franklin hospital serve.

Will Concord Hospital ensure that inpatient and outpatient MH services are not reduced as a result of this merger and are there any plans to increase MH services/supports?

Thank you for the opportunity to provide input regarding this acquisition. I am happy to discuss our testimony or answer any questions.

Sincerely,

Kenneth Norton, LICSW Executive Director