

MIDDLESEX HEALTH

Middlesex Hospital Community Health Needs Assessment

REPORT FOR YEAR ENDING SEPTEMBER 30, 2019



ACKNOWLEDGEMENTS

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EXECUTIVE SUMMARY

Middlesex Health is dedicated to improving the health, well-being and quality of life of the communities we serve. Conducting a community health needs assessment (CHNA) ensures that the most pressing health and health-related needs of a defined community are identified and subsequently addressed. By collecting and analyzing a variety of data sources specific to our geographic area, a comprehensive picture of our community's health status is formed. This process enables the identification of unmet needs, gaps and barriers to optimal health, well-being and health equity.

While the Internal Revenue Code 501(r)(3), as set forth by the Patient Protection and Affordable Care Act, requires not-for-profit hospitals to perform a community health needs assessment every three taxable years with input from persons representing the broad interests of the community, conducting a CHNA is a best practice for improving community health, quality of life and advancing health equity. The intent of this CHNA is not only to serve as a tool for guiding Middlesex Health's planning, but also to be a useful resource for our community partners and the general public.

Middlesex Health continues to use its CHNA as a vehicle for examining how the influencers of health outcomes - social determinants of health and health disparities - can have profound health and well-being implications resulting in poorer health outcomes and reduced quality of life for some. Assessing and addressing the systems and drivers that contribute to certain groups experiencing diminished health and quality of life is needed to close the gap of perpetual and widespread health disparities.

The significant health and health-related issues that have been identified through the process of conducting this CHNA include **chronic disease, mental health, substance use disorder, social determinants of health issues, at-risk populations, and health disparities**. Middlesex Health will use the findings of this CHNA to prioritize the significant health and health-related needs in order to inform the CHNA implementation strategy, also required by 501(r)(3). The implementation strategy will include the actions Middlesex Health intends to take to address the most prominent health and health-related needs identified in the CHNA, including an intentional focus on promoting health equity.

Middlesex Health remains grateful for its continued collaboration with our community partners that share a commitment to improving the health, well-being, and quality of life for our community members. We look forward to using the findings of this CHNA to further the work of these multisector partnerships by responding to identified needs and continuing to support community health improvement and advance health equity.

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Part I

Introduction and Background

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Significant Health & Health-Related Needs

Definition of the Community Served

Process and Methods Used to Conduct CHNA

Social Determinants of Health

Health Equity

Well-Being

INTRODUCTION AND BACKGROUND

ABOUT MIDDLESEX HEALTH AND MIDDLESEX HOSPITAL

An organizational rebranding from Middlesex Hospital to Middlesex Health occurred in December 2018 in order to represent the system's comprehensive network of services provided in conjunction with hospital services. Middlesex Hospital proper, founded in 1904, is an independent, not-for-profit, acute-care community hospital located in Middletown, CT. The hospital is licensed for 275 beds and 22 bassinets, and Middlesex Health serves a total population of over 250,000 persons. Middlesex Health employs over 3,400 people and has 405 active medical staff, 70 courtesy medical staff, and 147 allied health professionals on its medical staff. Services provided include inpatient and emergency services, extensive outpatient care, including diagnostic, physical medicine and rehabilitation (5 locations), behavioral health, disease management, radiology, laboratory, cancer care (2 locations), homecare, assisted living, wound and ostomy care, surgical services, medical specialists, urgent care (3 locations), and a network of primary care offices (15 sites). Middlesex Health continues to fully support its Family Medicine Residency Program (in existence for 40+ years) and Radiology School. In addition to its emergency department located in Middletown, Middlesex Health operates two satellite medical centers in Westbrook and Marlborough that have fully accredited, stand-alone emergency departments.

Middlesex Hospital holds five consecutive nursing Magnet® designations from the American Nurses Credentialing Center. Middlesex Health is a member of the Mayo Clinic Care Network, effective October 2015, a relationship that provides the system with access to information, knowledge and expertise from Mayo Clinic's expert specialists.

COMMENTS FROM MOST RECENTLY CONDUCTED CHNA & IMPLEMENTATION STRATEGY

Middlesex Health did not receive any written comments on its most recently completed CHNA (2016) and most recently adopted implementation strategy (2017). Any written comments on this CHNA (2019) and the upcoming implementation strategy (2020) may be directed to Catherine Rees, Director, Community Benefit, at catherine.rees@midhosp.org.

INPUT FROM PERSONS REPRESENTING THE BROAD INTERESTS OF THE COMMUNITY

A Community Health Needs Assessment Advisory Committee was formed to provide input and guidance throughout the process, including review of the study's components; review and input on the key informant survey; assistance with service area-wide key informant survey dissemination; review and input on community resources and assets; and final study review. The advisory committee was comprised of stakeholders representing the broad interests of the community, including local health departments, health care organizations (including medical and behavioral), community based organizations, schools, municipalities, foundations, advocacy groups, faith-based organizations and public safety. An effort was

made to ensure that medically underserved, low-income and minority populations were represented. CHNA Advisory Committee members are listed in **Table A1** in the **Appendix**.

OVERVIEW OF PROCESS AND METHODS USED TO CONDUCT CHNA

This report includes primary, secondary, quantitative and qualitative data sources of key health and well-being indicators, benchmarked against the State of Connecticut, whenever possible. Primary data was collected and analyzed through the DataHaven Community Wellbeing Survey and a key informant survey developed and administered by Middlesex Health via e-distribution. Secondary data was collected from a variety of publically available sources and the DataHaven Connecticut Hospital Association ChimeData study, an analysis of state-wide hospital emergency department, inpatient and observation discharge encounters for sixteen health and health-related indicators. More detail on the processes for the DataHaven Community Wellbeing Survey, the Middlesex Health key informant survey and the DataHaven ChimeData study can be found in the Methodology section. A listing of the data sources used in this report is provided in **Table A2** in the **Appendix**. To identify existing resources for health care and health-related social needs - a process that also allows any gaps in services to be uncovered - an extensive review of community assets was conducted with the aggregated resources located in **Part III**.

As Middletown differs demographically when compared to other municipalities in Middlesex Health's primary service area, it is extracted and benchmarked against Middlesex County and the State of Connecticut, whenever possible. In response to community request to provide granular town-level information, demographic and health and health-related indicator data are highlighted by the individual towns in Middlesex Health's primary service area, whenever possible.

This assessment was completed internally by Middlesex Health under the direction of, and written by, the Director of Community Benefit. For a listing of Middlesex Health participation, see **Table A3** in the **Appendix**.

DATAHAVEN CHIMEDATA STUDY TOWN LEVEL COMPANION REPORT

As an extension of this CHNA, town level data for each indicator from the DataHaven ChimeData study for the towns in Middlesex Health's service area are included in a companion report that can be accessed at <https://middlesexhealth.org/middlesex-and-the-community/serving-our-community/community-health-needs-assessment>. In this CHNA, Middletown data has been presented for each of the ChimeData indicators, benchmarked against Middlesex County and Connecticut, as Middletown consistently has encounter rates that are higher than the state for several conditions.

MIDDLESEX HEALTH CANCER CENTER COMMUNITY HEALTH NEEDS ASSESSMENT

In support of Middlesex Health's mission to provide the safest, highest-quality health care and the best experience possible for the community, the Middlesex Health Cancer Center is accredited by the American College of Surgeons Commission on Cancer. This commission recognizes cancer care

programs for their commitment to providing comprehensive, high-quality, and multidisciplinary patient-centered care. As part of this accreditation, the Middlesex Health Cancer Center conducts a community health needs assessment at least once every three years. To provide a thorough understanding of the community's cancer burden and barriers to cancer-related care, this process is done separate from but in conjunction with the Middlesex Health CHNA. For an in-depth snapshot of cancer-related issues in the community, please refer to the Middlesex Health Cancer Center CHNA, which can be accessed at middlesexhealth.org/cchna.

LIMITATIONS

The goal of this community health needs assessment is to assess the health status, quality of life and conditions that impact health, well-being and health equity for the residents in the communities served by Middlesex Health. While multiple primary, secondary, quantitative and qualitative data elements were collected and analyzed, Middlesex Health acknowledges that there are information and data point gaps which impact the ability to thoroughly measure and assess the community's health and well-being. Publically available data sources are often limited by insufficient sample size, given Middlesex County's small population size, which can limit the availability of data specific to Middlesex County. Of particular concern is the 1) inability to obtain and exhibit data stratified by race and ethnicity, which is likely due to insufficient data collection methodologies, and 2) lack of data availability to assess other vulnerable populations. In addition, while hospital emergency department, inpatient and observation encounter data sets are useful proxies for the health status of a community and are helpful for prioritization, they are only measures of those who go to the hospital. An important complement to hospital encounters would be outpatient visit types (i.e. primary care), which were not available for this report.

NEXT STEPS

Section 501(r)(3) of the Internal Revenue Code also requires section 501(c)(3) hospitals to adopt an implementation strategy to address the community health needs identified through the assessment. Middlesex Health will work with members of the Community Health Needs Assessment Advisory Committee to use the results of its 2019 CHNA to plan for the CHNA implementation strategy phase. To prioritize the significant health and health-related needs and inform the implementation strategy, priority setting will occur through use of a matrix and facilitated discussion between members of the Community Health Needs Assessment Advisory Committee and other community stakeholders and members. Prioritization elements will include magnitude of potential impact; existing assets; costs, inputs and resources needed; stakeholders/recipients who will benefit from the intervention; lead champion organization; availability of data; readiness; settings/sectors for implementation; and, feasibility. The results of this process will be used to develop goal-oriented strategies.

The implementation strategy will be reviewed and adopted by Middlesex Health's governing body prior to February 15, 2020. Components of the implementation strategy will include 1) the key health and health-related findings of the 2019 CHNA; 2) the actions Middlesex Health intends to take to address the significant health needs identified in the CHNA; 3) the anticipated impact of these actions; 4) the plan to evaluate the impacts; 5) identification of the programs and resources Middlesex Health plans to commit to address the identified needs; 6) a description of planned collaboration between Middlesex Health and community partners; and 7) an explanation of the reasons for not addressing any significant health needs.

In order to sustain the collaboration and momentum of the Community Health Needs Assessment Advisory Committee, next steps also include using the structure as a springboard to develop a county-wide multi-stakeholder coalition designed to improve community health and well-being and advance health equity through targeted goals and strategies in alignment with the findings of the CHNA.

ACTIONS SINCE 2016 CHNA

Middlesex Hospital's 2016 CHNA Implementation Strategy had four broad priority areas (mental health, substance abuse, aging population, and asthma), and each had specific goals. This section reviews the actions taken to address the significant health needs identified in the Hospital's previous CHNA (2016).

MENTAL HEALTH

Goal 1.1 *Improve access to mental health services through interprofessional collaborative practice.*

To achieve this goal, Middlesex Health implemented an evidence-based integrated care model for mental health treatment within the primary care setting. Mental health clinicians, who are primarily Licensed Clinical Social Workers, are embedded in select primary care offices within the Middlesex Health system. Patients can be referred to therapy within the primary care practice where they receive psychotherapy to address a myriad of issues including depression, anxiety, grief, and trauma. Immediate warm hand-offs between primary care providers and mental health providers can also occur after the primary care visit. The embedded mental health clinicians consult with a staff psychiatrist on a weekly basis to review cases. Due to the success of the pilot project, this service is expected to expand to all primary care offices within the Middlesex Health system.

Goal 1.2 *Provide specialized mental health treatment for high risk populations.*

The target population for this goal is young adults with emerging mental illness and/or substance use disorders. Action steps included 1) developing the service where, through assessment and intervention, young adults are able to regain and sustain functioning, and remain safe and healthy; 2) renovation of office space in order to accommodate the expansion; and 3) hiring psychiatrists specializing in young adult care. As planning and development are complete, program launch is expected to take place by the end of 2019.

SUBSTANCE ABUSE

Goal 2.1 *Develop a treatment program for high-risk patients experiencing severe alcohol use disorders.*

In order to accomplish this goal, an inpatient unit dedicated solely to patients experiencing acute alcohol withdrawal requiring medical care was created. The initiative was developed under the leadership and guidance of the Department of Psychiatry and through interprofessional collaboration with the Departments of Nursing and Social Work. The unit was identified, protocols were established and staff education was provided. Results have been highly positive, including: 1) to-date, no patients requiring transfer to the intensive care unit (ICU) since inception of the program (compared to a 40% ICU transfer prior to program launch); 2) improved patient satisfaction; 3) increased patient engagement in outpatient care after discharge; 4) increased staff satisfaction; and 5) reduction in staff and patient injuries.

Goal 2.2 A) *Develop and launch an opioid awareness campaign;* B) *Increase access to naloxone for patients at high risk for opioid overdose.*

In November 2017, Middlesex Health piloted a naloxone kit distribution program in its Middletown emergency department (ED) where the ED and pharmacy staff collaborated to develop a naloxone kit distribution policy and pathway. In early 2019, through a grant partnership between the Connecticut Hospital Association and the Department of Mental Health and Addiction Services (DMHAS), DMHAS was awarded federal funds to purchase a supply of Narcan® kits over a two year period for Connecticut EDs to distribute to individuals at risk of an opioid overdose. Middlesex Health elected to participate in this opportunity and expand its pilot program. Narcan® to-go kits are offered at all three Middlesex Health emergency departments to those who have either experienced an opioid overdose or are at-risk of an opioid overdose. The Narcan® to-go kits are also distributed to family members and friends of those who are at-risk in order to increase the likelihood of usage, if needed.

An additional opioid focus includes involvement in the DMHAS-funded “How Can We Help?” initiative, a partnership between the Ministerial Health Fellowship, Columbus House and Middlesex Health. The target populations are survivors of an opioid overdose, individuals at-risk of an opioid overdose, individuals struggling with opioid use, and families of those struggling with opioid use. Recovery coaches with lived experience engage program participants through multiple touch-points and connect their clients to needed treatment (including Medication Assisted Treatment), recovery support services and social services. The Middletown partnership is entitled *Middletown Recovery Together*, and other goals include community naloxone education sessions, a focus on prevention, and development of a local opioid task force for broad-based community support and engagement. Middlesex Health provided in-kind assistance to the Ministerial Health Fellowship in the grant application process, has developed a comprehensive multi-departmental referral system for patients and families/friends, and provides in-kind on-going administrative support.

Middlesex Health has not met the goal of developing and launching an opioid awareness campaign since its last CHNA, but will participate in opioid education and prevention through the *Middletown Recovery Together* collaborative.

AGING POPULATION

Goal 3 *Design and implement interventions to promote healthy aging in place and improve outcomes for the aging population.*

The actions suggested to meet this goal included development of an in-home comprehensive geriatric assessment and management service line using the Health Resources and Services Administration (HRSA) funded GOT Care! (Geriatrics Outreach and Training with Care) UConn, Middlesex Health and community partner quality improvement program as a template. The GOT Care! pilot program was successfully completed in June of 2017, followed by a period of required reporting and journal article development to broadly disseminate the model of care and successful outcomes. Program design

continues to be underway through 1) assessment of existing geriatric service capacity as well as organizational strengths and barriers; 2) data review from a doctoral dissertation which evaluated GOT Care! outcomes; 3) collaboration with a health care economist to conduct a cost/benefit analysis; and 4) development of a strategic plan to guide the process of designing an interprofessional practice geriatric service line, starting with the in-home comprehensive geriatric assessment. The work on the geriatric service modeling and implementation will continue past the conclusion of the 2016 CHNA cycle.

ASTHMA

Goal 4 *Improve asthma outcomes by meeting the Connecticut Asthma Initiative goals.*

In 2016, the Middlesex County Asthma Coalition was formed, with Middlesex Health serving as administrative lead under its Center for Chronic Care Management. The coalition includes representatives from the Middletown Public School System, the Middletown Department of Health, the Connecticut River Area Health District, the Community Health Center, Middletown, the Connecticut Department of Public Health, as well as multiple Middlesex Health departments (community benefit, primary care, emergency department, respiratory therapy, respiratory medicine, among others). The objective of the coalition is to work collaboratively to address areas of identified asthma need with a focus on those who are most at-risk.

To increase utilization of asthma action plans, Middlesex Health's Center for Chronic Care Management partnered with the Connecticut Department of Health, the Connecticut Department of Education, and additional providers in February of 2017 to launch the state's updated asthma action plan which included a new medication authorization section. This enhancement streamlines the work flow in provider offices and in the school setting, as a separate medication form is no longer necessary when using the asthma action plan. Middlesex County Asthma Coalition partners continue to distribute the updated form to provider offices and school nurses throughout Middlesex County.

To promote patient education techniques for asthma management, in 2017, Middlesex Health's Center for Chronic Care Management re-launched asthma education to nurses in the emergency department, homecare, primary care offices, Community Health Centers and to school nurses throughout Middlesex County. Educational sessions include inhaler techniques, use of the asthma action plan, and use of the Incheck Dial to assess patients' ability to use inhaler devices. In primary care practices nurses are also educated on the use of spirometry for asthma patients five years and older.

Since August 2018, the Connecticut River Area Health District, the Connecticut Department of Public Health and Middlesex Health have been partnering on the Putting in Airs initiative, an asthma home visiting program for children and adults in the defined service area who have poorly controlled asthma. The program includes an environmental assessment designed to target the reduction of environmental asthma triggers in the home, asthma education, and connection to needed services.

Future asthma plans include developing and conducting, through partnership, a qualitative study using focus groups to identify barriers for obtaining asthma control for at-risk populations.

SOCIAL DETERMINANTS OF HEALTH AND HEALTH EQUITY

An overarching emphasis for Middlesex Hospital's 2016 CHNA and Implementation Strategy was a focus on social determinants of health (SDOH) and health equity. Since its last CHNA, Middlesex Health has participated in several SDOH and health equity initiatives and partnerships.

Since May of 2017, Middlesex Health has been a partner site for the Centers for Medicare & Medicaid Services (CMS) **Accountable Health Communities (AHC)** five year pilot project through the Connecticut Coalition to Align Systems and Connect People with Services (CT CAPS), a six hospital partnership with Danbury Hospital (NuVance Health) serving as the bridge organization. The purpose of the AHC model is to test whether systematically identifying and addressing the health-related social needs of community-dwelling Medicare and Medicaid beneficiaries through screening, referral and community navigation services will impact health care quality, utilization and costs. The model design bridges the gap between clinical and community service providers. Eligible patients are screened for five core health-related social needs (housing instability; utility needs; food insecurity; interpersonal violence; transportation), as well as an added supplemental screen for substance abuse. High-risk beneficiaries (2+ emergency department visits in the past 12 months screening positive for health-related social needs) are referred to navigators who assist patients with accessing community based services in order to address the needs identified during the screening process. Planning and development occurred in the first year of the program, and Middlesex Health launched AHC screening in its Middletown emergency department in August of 2018.

In October of 2017, Middlesex Health formed a partnership with the **Middlesex County Branch NAACP Health Committee** ("NAACP Health Committee") to embark on a short- and long-term plan to measure, assess and address health inequities for people of color in Middlesex County. To guide its work and strategic plan development, the NAACP Health Committee conducted a Health Equity Impact Assessment which included review of Middlesex Hospital's 2016 CHNA to identify health and social disparities for people of color. In order to better understand how various systems foster health inequity and the lived experiences of people of color within the systems that contribute to their health outcomes, the NAACP Health Committee secured funding from the Connecticut Health Foundation, the Community Foundation of Middlesex County and the Middlesex Health Women's Wellness Fund to conduct a focus group study. Planning commenced in 2018 and the focus groups were conducted in 2019 by Health Equity Solutions (Hartford, CT). A report of the findings will be completed by Health Equity Solutions in November of 2019, the contents of which will serve as a road map for the NAACP Health Committee's next steps (including community conversations and solutions guided by the needs and preferences of those most impacted by disparities). Middlesex Health will incorporate the results of the NAACP Health Committee's focus group study into its 2019 CHNA implementation strategy prioritization planning, and will continue to partner with the NAACP Health Committee throughout the future phases of the focus group project and all future initiatives.

The **Ministerial Health Fellowship (MHF)**, a program under the Cross Street Training & Academic Center Inc. (CSTAC), is a faith-based healthcare advocacy network of Black pastors and church leaders from the Middletown, New Britain and Hartford areas that was formed to build knowledge of healthcare issues, advocate for health equity and forge connections with healthcare providers and public officials in order to reduce health disparities for communities of color. Middlesex Health began its partnership with the MHF in May of 2018 through collaboration with the Middlesex County Branch NAACP Health Committee. Since that time, Middlesex Health has joined the Ministerial Health Fellowship Meeting Group, has partnered with MHF on the DMHAS-funded “How Can We Help?” opioid initiative, and plans to collaborate with MHF on a Community Health Worker program as well as future health equity opportunities.

Partnering with MHF and the NAACP Health Committee enables Middlesex Health to further its commitment to advancing health equity by working with key community-based organizations that have a history of advocacy for communities of color, understanding community needs, and trusted relationships with community members.

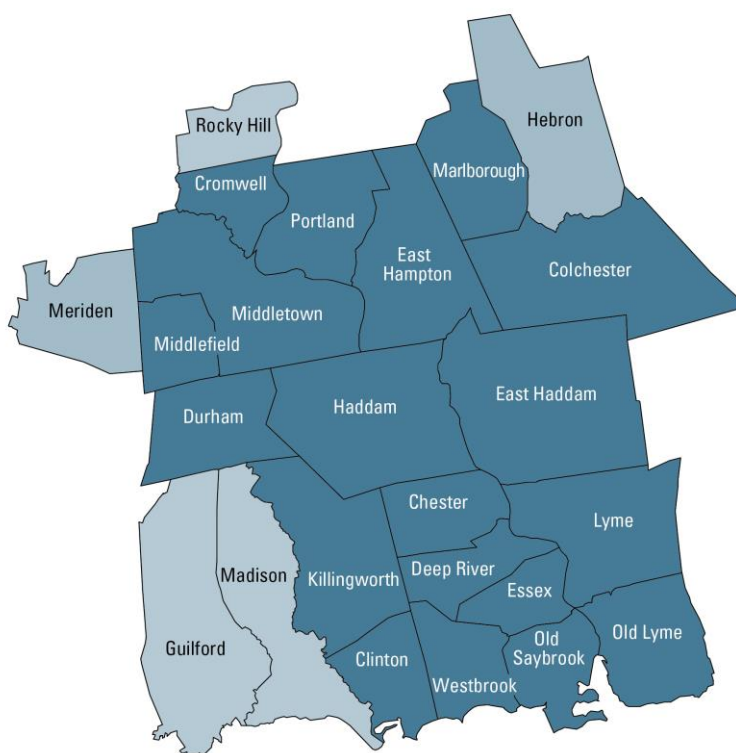
SIGNIFICANT HEALTH AND HEALTH-RELATED NEEDS IDENTIFIED THROUGH CHNA

The significant health and health-related needs of the community identified through the 2019 CHNA process are indicated below. The method used to identify these needs was based on frequency and degree of prevalence within the CHNA. Prioritization of the significant needs will take place during the CHNA implementation strategy phase. Use of a prioritization matrix and facilitated discussion between members of the Community Health Needs Assessment Advisory Committee and other community stakeholders and members will enable development of goal-oriented strategies which will inform the implementation strategy.

Category	Significant Health & Health-Related Needs
<p>Health & Health Behaviors</p>	<ul style="list-style-type: none"> ▪ Asthma ▪ Chronic Obstructive Pulmonary Disease (COPD) ▪ Depressive Disorder ▪ Diabetes ▪ Heart Disease ▪ Hypertension ▪ Mental Health (adults, adolescents, children) ▪ Overweight/Obesity ▪ Substance Use Disorder <ul style="list-style-type: none"> ○ Opioid Use Disorder ○ Alcohol Use Disorder ▪ Substance Use Among Adolescents <ul style="list-style-type: none"> ○ Vapor/Vape Pen/E-Cigarette Use ○ Alcohol Use ○ Marijuana Use ▪ Tobacco Use
<p>Social Determinants of Health</p>	<ul style="list-style-type: none"> ▪ Access to Health Care Services (including mental health and substance use disorder) ▪ Food Insecurity/Lack of Access to Healthy Foods ▪ Homelessness/Housing Insecurity ▪ Poverty/Income Constrained ▪ Prescription Affordability ▪ Transportation
<p>Other</p>	<ul style="list-style-type: none"> ▪ Access to & Affordable Childcare ▪ Adverse Childhood Experiences (ACEs) ▪ Need for Community Based Navigation (Community Health Workers) ▪ Falls ▪ Health Disparities ▪ Lack of Knowledge of Available Resources ▪ Older Adult Population ▪ Well-being Issues

DEFINITION OF THE COMMUNITY SERVED

Middlesex Health's service area includes twenty-four municipalities. There are nineteen towns in its primary service area: Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Haddam, Killingworth, Middlefield, Middletown, Old Saybrook, Portland, and Westbrook (the fifteen towns of Middlesex County) and Colchester, Lyme, Marlborough and Old Lyme; and, five towns in its secondary service area: Guilford, Hebron, Madison, Meriden, and Rocky Hill. Middlesex Health defines its community served (i.e. primary service area) as the towns that make up 75% of its inpatient and observation discharges. For the purposes for this report, "service area" represents the towns in Middlesex Health's primary service area.



By land area, Middlesex County (369 square miles) is the smallest county of the eight counties in Connecticut, and is the sixth in population size (Connecticut Data Collaborative, 2017). Municipality sizes by land mass vary throughout the county, from 54 square miles (East Haddam) to 10 square miles (Essex), with Middletown having 41 square miles of land area.

POPULATION

Of the total state of Connecticut population (3,588,184), 4.6% (163,410) reside in Middlesex County. With a population of 46,478 (Connecticut Data Collaborative 2017), Middletown is the largest municipality in Middlesex County (**Table 1**). The remaining towns in Middlesex Health’s primary service area fall into three population ranges: Colchester, Cromwell, Clinton, East Hampton and Old Saybrook have populations between 10,000 and 16,100; Portland, East Haddam, Haddam, Old Lyme, Durham, Westbrook, Essex, Killingworth, and Marlborough have populations between 5,000 and 9,999; and Chester, Deep River, Middlefield, and Lyme have populations less than 5,000. The Connecticut Office of Rural Health (CT-ORH) defines rural as all towns with a population census of 10,000 or less and a population density of 500 or less people per square mile. Based on this metric, the towns of Chester, Deep River, Durham, East Haddam, Haddam, Killingworth, Lyme, Marlborough, Middlefield, Old Lyme, Portland, and Westbrook are considered rural.

Table 1 - Population Estimates, 2017

	# of Persons		# of Persons
Middletown	46,478	Durham	7,240
Colchester	16,029	Westbrook	6,956
Cromwell	13,956	Essex	6,588
Clinton	12,957	Killingworth	6,401
East Hampton	12,901	Marlborough	6,397
Old Saybrook	10,132	Chester	4,254
Portland	9,360	Deep River	4,494
East Haddam	9,036	Middlefield	4,393
Haddam	8,264	Lyme	2,354
Old Lyme	7,432	Middlesex County	163,410

Sources: Connecticut Data Collaborative, <http://data.ctdata.org/>;
U.S. Census Annual Population Estimates

AGE DISTRIBUTION

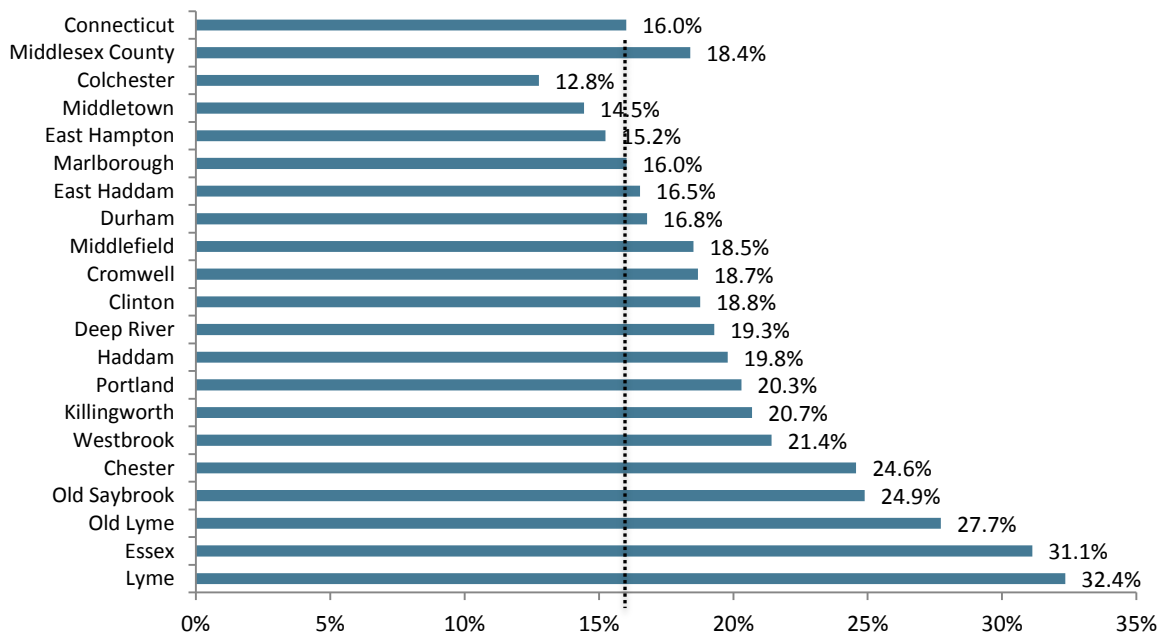
For the age distributions (**Table 2**), Middlesex County is below state averages in the 0-44 age categories and has a higher percentage of residents in the 45-54, 55-64, 65-74, 75-84, and 85+ age ranges when compared to the state. When extracting age 65+, Middlesex County (18.4%) exceeds Connecticut (16.0%), and the majority of the towns in Middlesex Health’s service area continue to have a greater concentration of older adults when compared to Connecticut (**Figure 1**). The towns of Colchester, Middletown and East Hampton fall below the state average of 16.0%. Marlborough, East Haddam, and Durham are on par with the state average, while Middlefield, Cromwell, Clinton, Deep River, Haddam, Portland, Killingworth, Westbrook, Chester, Old Saybrook, Old Lyme, Essex and Lyme considerably exceed the state average with a range of 18.5%-32.4% age 65+ (Connecticut Data Collaborative, 2013-2017).

Table 2 - Age Distribution, 2013-2017

	Age 0-4	Age 5-9	Age 10-14	Age 15-19	Age 20-24	Age 25-29	Age 30-34	Age 35-44	Age 45-54	Age 55-64	Age 65-74	Age 75-84	Age 85+
Chester	1.6%	4.7%	7.6%	7.0%	2.7%	2.0%	8.1%	8.1%	15.2%	18.5%	15.2%	4.5%	4.8%
Clinton	4.1%	6.0%	7.5%	4.7%	4.7%	4.4%	6.1%	11.1%	17.3%	15.4%	10.9%	6.2%	1.7%
Colchester	5.2%	5.6%	8.2%	7.4%	4.4%	6.7%	6.6%	10.8%	17.0%	15.5%	8.1%	3.2%	1.5%
Cromwell	4.8%	4.8%	7.2%	4.5%	3.7%	7.3%	6.9%	13.0%	13.5%	15.7%	9.5%	4.2%	5.0%
Deep River	5.8%	4.6%	4.3%	8.1%	4.4%	4.0%	4.3%	12.8%	18.1%	14.3%	13.3%	3.9%	2.1%
Durham	3.7%	4.5%	5.1%	9.2%	4.9%	4.1%	4.3%	12.2%	20.0%	15.2%	10.7%	4.4%	1.7%
East Haddam	5.7%	4.3%	4.2%	6.7%	5.3%	4.9%	4.0%	10.0%	20.0%	18.4%	10.7%	3.4%	2.5%
East Hampton	3.9%	5.7%	7.6%	5.0%	5.0%	5.0%	4.4%	12.0%	19.3%	16.9%	10.4%	2.5%	2.3%
Essex	1.2%	3.1%	7.0%	7.1%	4.8%	2.0%	3.1%	6.4%	17.0%	17.2%	18.1%	9.0%	4.0%
Haddam	2.0%	7.8%	6.2%	6.0%	4.6%	3.0%	4.0%	11.3%	19.0%	16.4%	12.0%	4.8%	3.0%
Killingworth	3.9%	4.7%	7.5%	7.2%	4.7%	2.8%	3.9%	9.7%	19.5%	15.4%	13.1%	5.3%	2.3%
Lyme	3.5%	4.3%	4.3%	3.4%	5.0%	1.8%	3.1%	9.9%	14.7%	17.7%	19.1%	9.2%	4.0%
Marlborough	5.5%	4.4%	6.4%	8.2%	4.6%	3.2%	5.2%	14.5%	18.4%	13.7%	12.8%	1.7%	1.6%
Middlefield	4.2%	4.9%	5.7%	6.7%	5.8%	4.0%	3.5%	11.0%	19.7%	16.1%	10.5%	5.1%	2.9%
Middletown	5.5%	3.5%	5.1%	7.5%	10.5%	8.1%	6.9%	12.9%	12.7%	12.9%	7.7%	4.3%	2.5%
Old Lyme	1.7%	5.4%	7.6%	5.7%	2.7%	2.0%	3.4%	9.0%	15.9%	19.0%	15.9%	8.7%	3.1%
Old Saybrook	3.6%	6.3%	5.5%	5.9%	2.7%	3.9%	4.1%	10.3%	14.0%	19.0%	11.6%	9.1%	4.2%
Portland	4.2%	4.5%	7.9%	5.5%	4.4%	3.8%	5.9%	11.0%	15.8%	16.7%	10.6%	6.0%	3.7%
Westbrook	2.7%	2.7%	5.1%	5.0%	6.0%	3.9%	2.9%	11.6%	17.9%	20.9%	12.5%	5.1%	3.8%
Mdsx County	4.3%	4.6%	6.1%	6.4%	6.2%	5.4%	5.4%	11.5%	16.0%	15.7%	10.5%	5.0%	3.0%
Connecticut	5.2%	5.8%	6.3%	7.0%	6.8%	6.1%	6.1%	12.1%	14.9%	13.8%	8.9%	4.7%	2.5%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

Figure 1 - Age 65+ Distribution, 2013-2017



Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

Based on 2017 population data, the total 65+ population in Middlesex County was 30,067, and the total age 65+ population for the towns in Middlesex Health’s primary service area was 35,973. **Table 3** provides the numeric value that corresponds to the age 65+ estimate per town in Middlesex Health’s service area.

Table 3 - Age 65+ Population per Town, 2017

	Age 65+ %	Age 65+ Population		Age 65+ %	Age 65+ Population
Chester	24.6%	1,045	Killingworth	20.7%	1,325
Clinton	18.8%	2,432	Lyme	32.4%	762
Colchester	12.8%	2,047	Marlborough	16.0%	1,025
Cromwell	18.7%	2,607	Middlefield	18.5%	814
Deep River	19.3%	867	Middletown	14.5%	6,716
Durham	16.8%	1,216	Old Lyme	27.7%	2,060
East Haddam	16.5%	1,494	Old Saybrook	24.9%	2,522
East Hampton	15.2%	1,966	Portland	20.3%	1,900
Essex	31.1%	2,050	Westbrook	21.4%	1,490
Haddam	19.8%	1,635	Middlesex County	18.4%	30,067

Sources: Connecticut Data Collaborative, <http://data.ctdata.org/>, 2013 - 2017; U.S. Census Annual Population Estimates, 2017

POPULATION PROJECTIONS AGE 65 AND OVER

The trend of a disproportionately higher 65+ older adult population in the majority of towns in Middlesex Health’s service area when compared to the state average continues to be evident for population projections for 2020, 2030, and 2040 (**Table 4**). For 2020, excluding Middletown and Colchester (at 14.3% and 15.2%), the expected growth for age 65+ ranges from 17.3% to 30.0% in the remaining seventeen towns in Middlesex Health’s service area compared to 16.1% for Connecticut. For 2030, excluding Middletown (at 14.9%), the expected growth for age 65+ ranges from 19.5% to 34.9% for the remaining eighteen towns in Middlesex Health’s service area compared to 17.9% for Connecticut. For 2040, excluding Middletown (at 13.9%), the expected growth for age 65+ ranges from 18.5% to 36.4% in the remaining eighteen towns in Middlesex Health’s service area compared to 17.3% for Connecticut.

Table 4 - Age 65+ Population Projections

	2020	2030	2040		2020	2030	2040
Chester	28.3%	34.9%	34.8%	Killingworth	25.1%	31.4%	32.8%
Clinton	22.6%	28.3%	30.9%	Lyme	30.0%	31.8%	30.8%
Colchester	15.2%	22.8%	25.8%	Marlborough	19.4%	22.0%	21.2%
Cromwell	18.6%	19.5%	18.5%	Middlefield	17.9%	22.1%	23.4%
Deep River	20.6%	26.4%	31.1%	Middletown	14.3%	14.9%	13.9%
Durham	17.3%	20.6%	21.2%	Old Lyme	28.2%	33.0%	32.2%
East Haddam	19.3%	26.2%	28.8%	Old Saybrook	29.5%	33.6%	34.4%
East Hampton	18.0%	26.0%	32.4%	Portland	18.5%	21.1%	22.3%
Essex	28.5%	34.9%	36.4%	Westbrook	25.1%	28.8%	29.7%
Haddam	18.4%	21.7%	22.0%	Middlesex County	19.3%	22.3%	22.5%

Sources: Connecticut State Data Center, https://ctsdsc.uconn.edu/2015_2040_projections/; CT Data, <https://data.ct.gov/Government/2015-2040-Population-Projections-Town-Level/>

As the majority of towns in Middlesex Health's service area considerably exceed Connecticut's age 65+ current benchmark and projections, examining aging trends is important in order to inform the design of needed local interventions to support independent function and extend quality of life for older adults, with special attention paid to vulnerable at-risk elders who may be experiencing health disparities. The National Academies of Sciences, Engineering, and Medicine's *Future Directions for the Demography of Aging* report (2018) and the Population Reference Bureau (2018) outline the following trends and considerations for the older adult population in the United States:

1. **Older adults with disabilities:** the potential for disability increases with age. Over 20% of adults ages 65 - 69 experience poor capacity (defined as physical limitations, poor vision, poor hearing, or probable dementia), and by age 90, over 80% of older adults experience poor capacity (NHATS, 2015).
2. **Family caregiving:** the traditional family caregiving pool for older adults in the U.S. is shrinking. Typically spouses and adult children provide the majority of care that supports independent living for older persons. With the national decline in marriage, increase in divorce rate and decrease in fertility rate, many adults age 65+ may not have a spouse or adult child to rely on for care.
3. **Geographic location:** older adults are becoming more concentrated in rural areas. Rural locations may have restricted public transportation, fewer health care services, longer travel time to obtain care, and limited access to resources.
4. **Racial and ethnic health disparities:** it is expected that the older adult population will become increasingly more diverse. As this happens, racial/ethnic health disparities will play a greater role in shaping the overall health of older adults.
5. **Socioeconomic-related health disparities:** health and mortality that are socioeconomic-related are dramatic and widening. The cumulative effects of socioeconomic conditions over the entire life course impact the health and well-being of the older population.

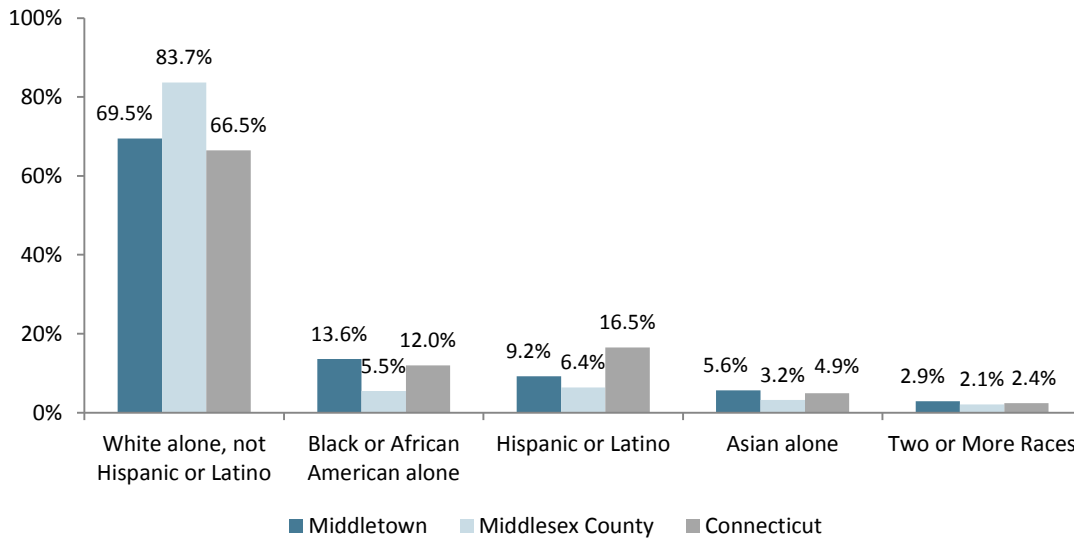
Source 1: The National Academies of Sciences, Engineering, and Medicine's *Future Directions for the Demography of Aging* report, 2018, <https://doi.org/10.17226/25064>

Source 2: Population Reference Bureau, 2018, Eight Demographic Trends Transforming America's Older Population, <https://www.prb.org/eight-demographic-trends-transforming-americas-older-population/#>

RACE AND HISPANIC OR LATINO ORIGIN

The racial and ethnic make-up of Middletown and Middlesex County as compared to the state of Connecticut is outlined in **Figure 2**. Middletown has a more diverse demographic relative to the other towns in Middlesex County and resembles Connecticut except in the Hispanic or Latino category, where Middletown has a smaller population.

Figure 2 - Race & Hispanic or Latino Origin, 2017 & 2018



Source: U.S. Census Quick Facts; <https://www.census.gov/quickfacts/>
 Connecticut Source: Vintage 2018 Population Estimates Program
 Middlesex County Source: Vintage 2018 Population Estimates Program
 Middletown Source: 2017 American Community Survey (ACS), 5-year estimates
 Limitation: estimates that are from different data sources and time-frames are generally not comparable to other geographic levels due to methodology differences that may exist between the different data sources

VETERAN STATUS

The veteran population from 2013-2017 was 2,483 in Middletown; 10,694 in Middlesex County and 180,111 in Connecticut (U.S. Census QuickFacts). Of the towns in Middlesex Health’s service area, sixteen have veteran populations that are above the state average (6.4%), two mirror the state average, and one is below (**Table 5**).

Table 5 – Veteran Status, 2013-2017

	% of Population	# of Persons		% of Population	# of Persons
Chester	8.4%	296	Killingworth	7.0%	356
Clinton	8.7%	908	Lyme	9.7%	199
Colchester	8.2%	998	Marlborough	7.4%	374
Cromwell	6.7%	750	Middlefield	7.2%	258
Deep River	8.0%	284	Middletown	6.4%	2,483
Durham	5.5%	318	Old Lyme	11.1%	671
East Haddam	8.5%	625	Old Saybrook	10.1%	829
East Hampton	10.3%	1,042	Portland	8.8%	654
Essex	12.9%	712	Westbrook	10.0%	598
Haddam	8.7%	581	Middlesex County	6.5%	10,694

Sources: Connecticut Data Collaborative, <http://data.ctdata.org/>;
 U.S. Census Quick Facts; <https://www.census.gov/quickfacts/>

LIFE EXPECTANCY & MORTALITY

For Middlesex County, disparities exist for the Black population when benchmarked against White and Hispanic for life expectancy, premature mortality, and years of potential life lost (YPLL), with significant disparities in mortality and YPLL (**Table 6**). Years of potential life lost is a measure of premature mortality, that is, an estimate of the average time a person would have lived if he or she had not died prematurely, and can be used to identify disproportionate premature death among populations.

Original data sources for Table 5:

- Life Expectancy (age): National Center for Health Statistics - Mortality Files (2015-2017)
- Premature Age-Adjusted Mortality Rate: CDC WONDER mortality data (2015-2017)
- Premature Death - Years of Potential Life Lost Rate: National Center for Health Statistics – Mortality files (2015-2017)
- Injury Death Rate: CDC WONDER mortality data (2015-2017)

Table 6 - Life Expectancy and Mortality Rates

	Middlesex County	Connecticut
Life Expectancy (age)		
Total	81.1	80.8
White	81.0	---
Black	78.1	---
Hispanic	87.8	---
Premature Age-Adjusted Mortality Rate (per 100,000 population)		
Total	268	274
White	271	---
Black	393	---
Hispanic	170	---
Premature Death - Years of Potential Life Lost Rate (per 100,000 population), before age 75		
Total	5434	5581
White	5421	---
Black	8456	---
Hispanic	4558	---
Injury Death Rate (per 100,000 population)		
Total	72	65

Source: County Health Rankings & Roadmaps 2019

PROCESS AND METHODS USED TO CONDUCT CHNA

DATAHAVEN 2018 COMMUNITY WELLBEING SURVEY

DataHaven, located in New Haven, CT, is a non-profit organization with a 25 year history of collecting, sharing and interpreting public data to support local communities. Through the Community Wellbeing Survey, DataHaven is able to collect and produce reliable community-level information on issues that impact the well-being of the community being measured. Indicators include economic mobility, macroeconomic trends, employment, transportation, housing quality, housing security, food security, civic satisfaction, civic engagement, community optimism, community vitality, neighborhood environment, education access, health outcomes, health behaviors, and health care access (DataHaven 2018, 2019).

In 2018, DataHaven conducted its second state-wide Community Wellbeing Survey through live, in-depth telephonic interviews where randomly selected residents throughout the state answered questions relating to quality of life, health and happiness. Middlesex Health continued its participation in the 2018 survey to support survey administration in Middlesex County. In addition to Middlesex Health, 2018 survey funding partners for Middlesex County included the Liberty Bank Foundation, the Workforce Alliance, and the Connecticut Health Foundation. A total of 382 adults age 18 or older were surveyed in Middlesex County (200 of which resided in the city of Middletown). While the sampling in Middlesex County was smaller in 2018 when compared to the 2015 DataHaven Community Wellbeing Survey cycle, a total of 1,034 adults age 18 or older were surveyed in Middlesex County (500 of which resided in the city of Middletown) for both survey cycles combined. The nature of the sample for Middletown and Middlesex County is listed in the **Appendix (Table A4)**.

The demographic categories that describe the sample of residents age 18 or older for the 2018 survey conducted in Middlesex County are: 1) gender: male, female; 2) age: under age 55; age 55 or older; 3) education: high school or less; some college or associate's; bachelor's degree or higher; 4) income: less than \$75,000; \$75,000 or more; and 5) children in household: yes; no. Due to the reduction in sample size for 2018 for Middlesex County when compared to the 2015 cycle, granularity is absent in the following demographic categories: race/ethnicity (captured as white and non-white in the 2015 survey) and income (less than \$30,000; \$30,000 to \$75,000; and \$75,000 or more in the 2015 survey) which prevents stratification by race/ethnicity and those who are income constrained. In addition, for the 2018 Middletown sample, "children in household" was not included and "high school or less" was excluded as an education level option, due to sample size limitations.

Upon survey completion, DataHaven and the Siena College Research Institute developed regional crosstabs weighted by age, gender, reported race (when sample size is sufficient), and county to ensure statistical representativeness. All Community Wellbeing Survey crosstabs are made publicly available for widespread use. The crosstabs for Middletown and Middlesex County can be found at www.ctdatahaven.org and are also posted on the Middlesex Health website at <https://middlesexhospital.org/middlesex-and-thecommunity/serving-our-community/community-health-needs-assessment>.

Select Middlesex County and Middletown survey results for 2018 are presented throughout this assessment and are benchmarked against Connecticut, whenever possible. A listing of the 2018 DataHaven Community Wellbeing Survey questions is included in the **Appendix (Table A5)**.

FIVE CONNECTICUTS

In addition to issuing town, county and state crosstabs, the 2018 DataHaven Community Wellbeing Survey continues to present its data using the Five Connecticut concept (Levy, et al., 2015), a system that clusters Connecticut towns that share similar characteristics into one of five categories (wealthy, suburban, rural, urban periphery, and urban core) based on each town's population density, income, and poverty rates (**Table 7**). The use of clusters allows for socioeconomic comparisons among different types of Connecticut towns to be made while creating relevant aggregate data about the state's geographies that may not be as available at the level of a single town (Levy, et al., 2015).

Table 7 - Five Connecticut Clusters & Definitions

Category	Definition
1 Wealthy CT	Has exceptionally high income, low poverty, and moderate population density
2 Suburban CT	Has above average income, low poverty, and moderate population density
3 Rural CT	Has average income, below average poverty, and the lowest population density
4 Urban Periphery CT	Has below average income, average poverty, and high population density
5 Urban Core CT	Has the lowest income, highest poverty, and the highest population density

Source: Levy, Don: Five Connecticut 2010 Update. (2015)

Middletown is classified as an urban periphery town, with the remaining towns in Middlesex Health's service area categorized as rural or suburban (**Table 8**).

Table 8 - Five Connecticut Town Categorization

Town	Five Connecticut Classification	Town	Five Connecticut Classification
Chester	Suburban	Killingworth	Suburban
Clinton	Suburban	Lyme	Suburban
Colchester	Suburban	Marlborough	Suburban
Cromwell	Suburban	Middlefield	Suburban
Deep River	Rural	Middletown	Urban periphery
Durham	Suburban	Old Lyme	Suburban
East Haddam	Rural	Old Saybrook	Suburban
East Hampton	Suburban	Portland	Rural
Essex	Suburban	Westbrook	Suburban
Haddam	Suburban		

Source: Levy, Don: Five Connecticut 2010 Update. (2015)

DATAHAVEN CHIMEDATA STUDY

Through a special study agreement between partner hospitals in Connecticut, the Connecticut Hospital Association (CHA) and DataHaven, a ChimeData analysis was conducted by DataHaven. The data extraction included de-identified hospital information for emergency department, inpatient and observation encounters - by primary and secondary diagnoses - incurred by any residents of any town in Connecticut regardless of where the individual received treatment.

Sixteen health and health-related indicators were analyzed (asthma; chronic obstructive pulmonary disease; dental; depressive disorder; diabetes; diabetes uncontrolled; falls; heart disease; homicide and assault; hypertension; lung cancer; mental disorder; motor vehicle accidents; stroke; substance abuse; and suicide and self-harm) and were benchmarked over two three year time periods (2012-2014 and 2015-2017). The following parameters define DataHaven's ChimeData analysis:

- The study is by encounters, not by individuals, so there may be repeat encounters by the same individual for the same or different conditions.
- All town and county profiles are benchmarked against the state of Connecticut.
- DataHaven calculated annualized encounter rates per 10,000 persons for each indicator for the two three year time periods.
- For each geographic region and indicator, DataHaven provided annualized encounter rates for six age strata (0-19, 20-44, 45-64, 65-74, 75-84, and 85+ years) and by gender. For asthma, in order to capture children, a different age strata was used (0-4, 5-19, 20-44, 45-64, 65-74, and 75+ years).
- For each geographic region and indicator, DataHaven provided a single age-adjusted annualized encounter rate. An age-adjusted rate was not calculated for asthma.
- Data points that have no value indicate where data has been suppressed due to either a small number of encounters or not enough of a population from which to generalize.

The full DataHaven ChimeData study description can be found in section **A6** of the **Appendix**.

Data about residents' hospital emergency department, inpatient and observation visits can be used to review variations in health and quality of life by geography and by specific populations. Encounter rates are useful for examining differences between populations (for example, for the ChimeData study, by age group and gender), where age-adjusted rates are helpful for identifying risk and overall burden. A limitation to the study includes the inability to stratify by race and ethnicity due to a variance in race and ethnicity data collection methodologies by hospitals.

As an extension of this CHNA, town level data for each indicator from the ChimeData study for the towns in Middlesex Health's service area are included in a companion piece that can be located at <https://middlesexhealth.org/middlesex-and-the-community/serving-our-community/community-health-needs-assessment>. In this CHNA, Middletown data has been presented for each of the ChimeData indicators, benchmarked against Middlesex County and Connecticut, as Middletown consistently has encounter rates that are higher than the state for several conditions.

KEY INFORMANT SURVEY

With input and assistance from Community Health Needs Assessment Advisory Committee members, the key informant survey, originally developed internally by Middlesex Hospital in 2016 through review of multiple existing resources, was streamlined and updated to include additional health and quality of life indicators, including new questions on opioids and well-being. A focus on social determinants of health and health equity remained as integral sections of the 2019 survey. The majority of the survey questions were posed in quantitative form through Likert scales. Qualitative open-ended reply options were given through the “other” response choice for select questions.

The 14 question survey was administered through the online SurveyMonkey format and included two separate and distinct URLs for the Community and Middlesex Health staff. The surveys were open for completion for a four week time period. The Community e-survey was extensively disseminated to an array of sector contacts in Middletown, Middlesex County and the periphery towns of Middlesex Health’s primary service area in order to ensure responses from a wide range of representative community members and leaders with diverse backgrounds, perspectives and first-hand knowledge about their communities. Sectors included advocacy groups, alliances/coalitions, the business community, educational institutions, community based organizations, community residents, elected officials, faith-based organizations, foundations, health care organizations (including medical and behavioral), local health departments, mental health organizations, primary care/family medicine practices, public safety organizations (police, fire, emergency management), social services, substance treatment facilities, and youth and family services. Community Health Needs Assessment Advisory Committee members were asked to broadly share the community survey link, and all survey recipients were invited to share the link with co-workers/colleagues, friends and family or anyone who lives or works in Middlesex County. The community survey was posted on two health department web-sites and sent to several agency community e-distribution lists.

As the majority of Middlesex Health’s staff live in Middlesex Health’s service area, their dual role of community resident and worker within a health care system provides a perspective that is interesting to benchmark against the Community survey responses. The specific Middlesex Health e-survey was sent to leadership e-distribution lists (executive staff, directors, managers, supervisors) with a request to share the explanation of purpose and survey URL with individual departmental staff e-distribution lists. An explanation and active link was also included in Middlesex Health’s weekly newsletter for several weeks during the key informant survey completion time period.

A total of 427 surveys were completed, with 239 completed by the Community and 188 completed by Middlesex Health staff. The Community and Middlesex Health response results were analyzed separately and are included throughout this CHNA.

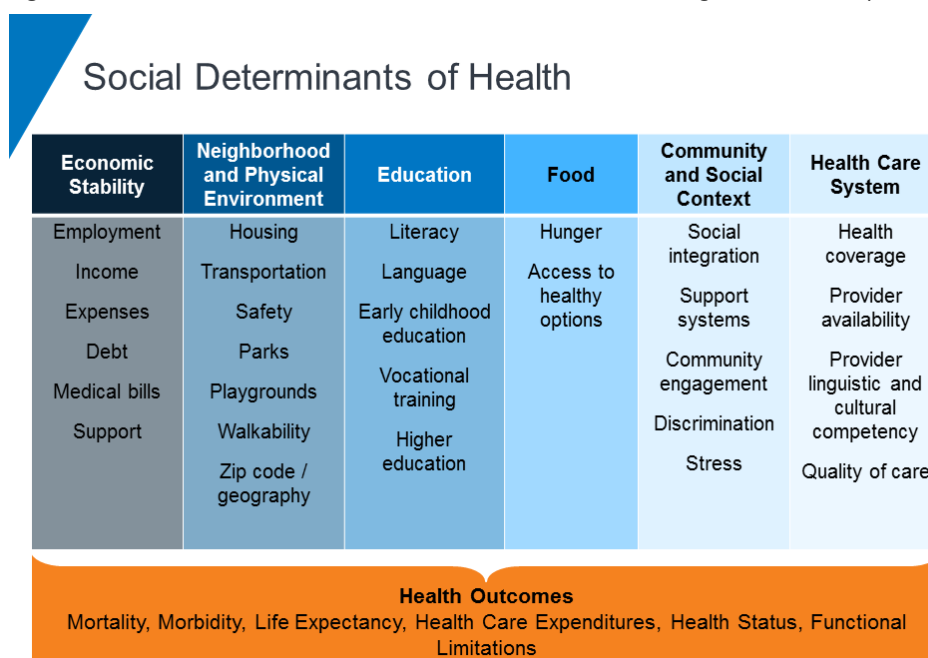
SOCIAL DETERMINANTS OF HEALTH

Social determinants of health (SDOH) are the conditions in the environment in which people are born, grow, live, learn, work, play, worship and age that affect a wide range of health, functioning, and quality-of-life outcomes and risk. SDOHs are mostly responsible for health inequities, the unfair and avoidable differences in health status between populations (WHO, 2019; NASEM, 2017).

As SDOHs are key drivers of health and health outcomes, they are necessary to address collectively in order to improve health and reduce longstanding, disproportionate disparities in health and experience in the health care system for historically underserved populations. **Figure 3** outlines six areas (economic stability; neighborhood and physical environment; education; food; community and social context; health care system) that influence health outcomes, defined by mortality, morbidity, life expectancy, health care expenditures, health status and functional limitations.

As policies and practices (e.g. economic policies, development agendas, social norms, social policies and political systems) in non-health sectors also have impacts on health and health equity, a coordinated effort is necessary to address the forces and systems that impact social determinants of health (AMA, 2019). While many SDOHs may appear outside of the scope of the health care delivery system, health care organizations are vital partners in this work for both identifying and addressing the non-medical, social needs of patients (KFF, 2018). It is imperative that siloed sectors collaborate in order to bridge health care and community health and to conduct a gap analysis to identify if there is sufficient service capacity or supply to meet identified health-related social needs.

Figure 3 - Social Factors that Influence Health Outcomes, Well-Being and Health Disparities



Source: Kaiser Family Foundation, *Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity*, Issue Brief May 2018



This section reviews a selection of social determinants of health that influence health outcomes, such as income, financial insecurity, poverty, employment status, education level, housing status, living environment, transportation, food insecurity and access to health care services.

MEDIAN HOUSEHOLD INCOME

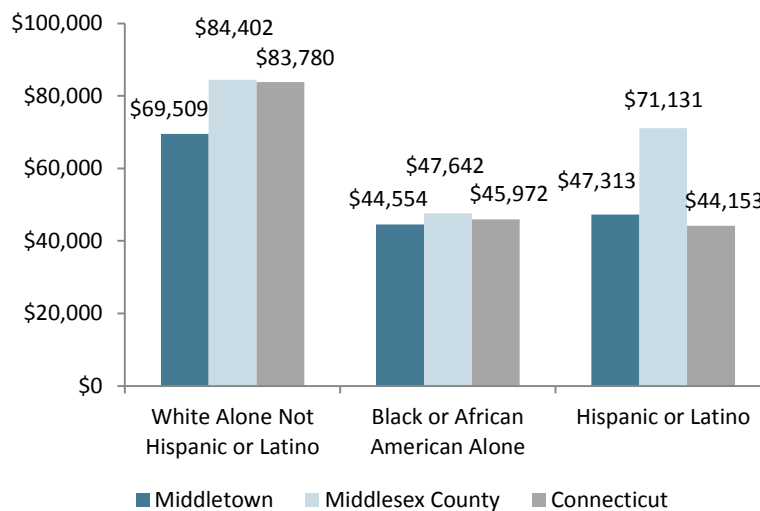
While all of the towns in Middlesex Health’s service area, except Middletown and Deep River (**Table 9**), exceed Connecticut’s median income of \$73,781 (Connecticut Data Collaborative, 2017), there are significant median household income disparities among the Black or African American Alone and Hispanic or Latino populations in Middletown and Middlesex County when compared to White Alone Not Hispanic or Latino (**Figure 4**).

Table 9 - Median Household Income, 2013-2017

	Median Household Income		Median Household Income
Chester	\$86,675	Killingworth	\$113,413
Clinton	\$76,509	Lyme	\$84,922
Colchester	\$101,031	Marlborough	\$110,250
Cromwell	\$85,856	Middlefield	\$103,844
Deep River	\$69,028	Middletown	\$63,914
Durham	\$116,232	Old Lyme	\$95,175
East Haddam	\$78,177	Old Saybrook	\$74,185
East Hampton	\$99,104	Portland	\$88,433
Essex	\$87,857	Westbrook	\$95,583
Haddam	\$105,920	Middlesex County	\$81,673

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

Figure 4 - Median Household Income by Select Races and Hispanic or Latino Origin, 2013-2017



Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

The towns in Middlesex County have experienced a range of negative, flat, moderate and significant median household income growth from 1990-2017 (**Table 10**).

Table 10 - Median Household Income Percentage Change, 1990-2017

	Median Household Income 1990	Median Household Income 2017	% Change
Chester	\$79,712	\$86,675	9%
Clinton	\$83,699	\$76,509	-9%
Cromwell	\$85,680	\$85,856	0%
Deep River	\$72,164	\$69,028	-4%
Durham	\$101,576	\$116,232	14%
East Haddam	\$80,710	\$78,177	-3%
East Hampton	\$87,559	\$99,104	13%
Essex	\$82,147	\$87,857	7%
Haddam	\$94,227	\$105,920	12%
Killingworth	\$93,265	\$113,413	22%
Middlefield	\$84,807	\$103,844	22%
Middletown	\$68,668	\$63,914	-7%
Old Saybrook	\$87,966	\$74,185	-16%
Portland	\$84,971	\$88,433	4%
Westbrook	\$68,468	\$95,583	40%
Middlesex County	\$78,825	\$81,673	4%
Connecticut	\$76,106	\$73,781	-3%

Source: 1990 Decennial Census, 2017 American Community Survey (ACS) 5-year; DataHaven analysis, adjusted for inflation to 2017 dollars

FINANCIAL INSECURITY

The 2018 DataHaven Community Wellbeing Survey asked respondents questions about level of financial security, specifically, “*how well would you say you are managing financially these days?*” (**Table 11**).

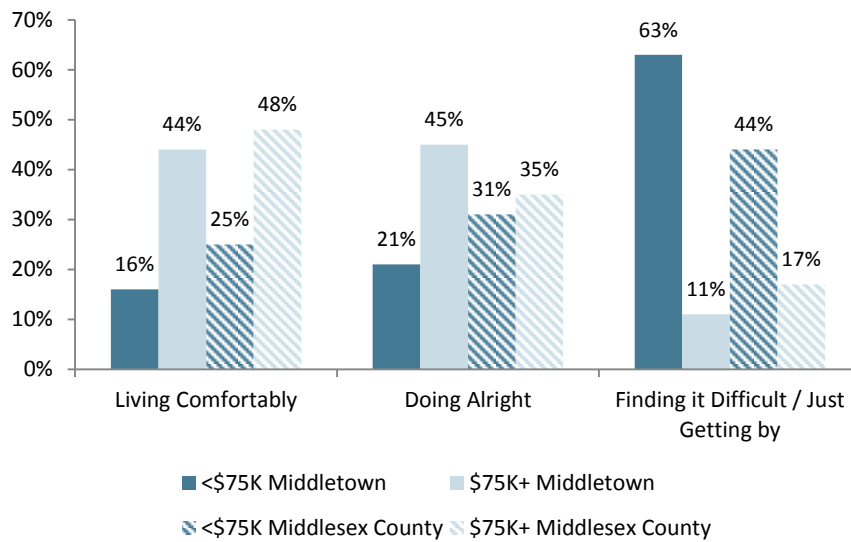
Table 11 - Financial Wellbeing

	Gender		Income	
	Male	Female	<\$75K	\$75K+
Middletown				
Living comfortably	36%	22%	16%	44%
Doing alright	39%	27%	21%	45%
Just getting by	20%	24%	35%	7%
Finding it difficult	3%	18%	18%	3%
Finding it very difficult	2%	8%	10%	1%
Middlesex County				
Living comfortably	38%	35%	25%	48%
Doing alright	39%	32%	31%	35%
Just getting by	15%	17%	24%	12%
Finding it difficult	3%	12%	12%	5%
Finding it very difficult	5%	2%	8%	0%

Source: DataHaven Community Wellbeing Survey, 2018

For the total respondents to this question, a greater percentage (38%) in Middletown experience financial stress (just getting by/finding it difficult/finding it very difficult) when benchmarked against Middlesex County (28%) and Connecticut (33%), with a significantly higher percentage of female respondents from Middletown (50%) feeling they are financially struggling when compared to male respondents from Middletown (25%). Respondents with incomes lower than \$75,000, especially in Middletown, reported experiencing elevated feelings of financial stress when compared to those earning \$75,000 and above (Figure 5).

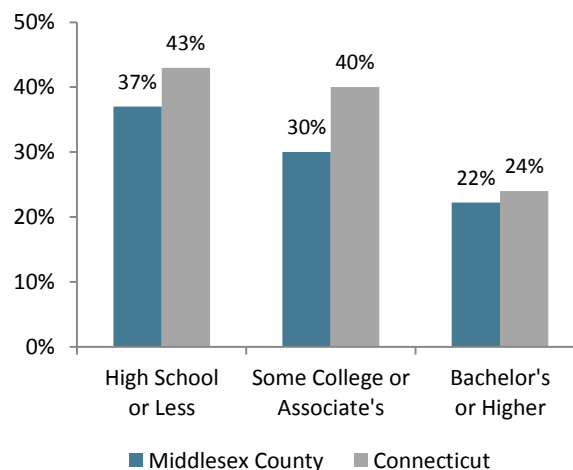
Figure 5 – Financial Wellbeing by Income



Source: DataHaven Community Wellbeing Survey, 2018

Education level is associated with feelings of financial security. The 2018 DataHaven Community Wellbeing Survey respondents with a high school diploma or less and some college or associate's degree reported experiencing more financial insecurity when compared to those with a bachelor's degree or higher (Figure 6).

Figure 6 - Respondents Financially Struggling by Educational Level



Source: DataHaven Community Wellbeing Survey, 2018

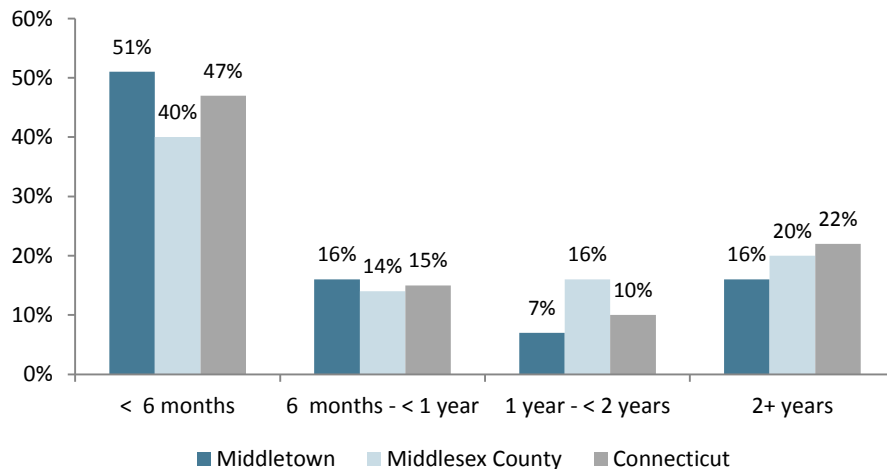
In response to the 2018 DataHaven Community Wellbeing Survey question, “if you lost all your current sources of household income, including your paycheck, public assistance, or other forms of income, about how long do you think you could continue to live as you live today?” (Table 12), the majority of respondents reported less than 6 months when compared to the other time-frame response options ranging from 6 months to 2 years (Figure 7).

Table 12 - Financial Viability for Income Loss

	Middletown	Middlesex County	Connecticut
Less than a month	19%	13%	20%
At least one month but less than 2	15%	11%	11%
At least 2 months but less than 6	17%	16%	16%
At least 6 months but less than a year	16%	14%	15%
At least a year but less than 2 years	7%	16%	10%
Two years or more	16%	20%	22%

Source: DataHaven Community Wellbeing Survey, 2018

Figure 7 - Financial Viability for Income Loss



Source: DataHaven Community Wellbeing Survey, 2018

POVERTY STATUS

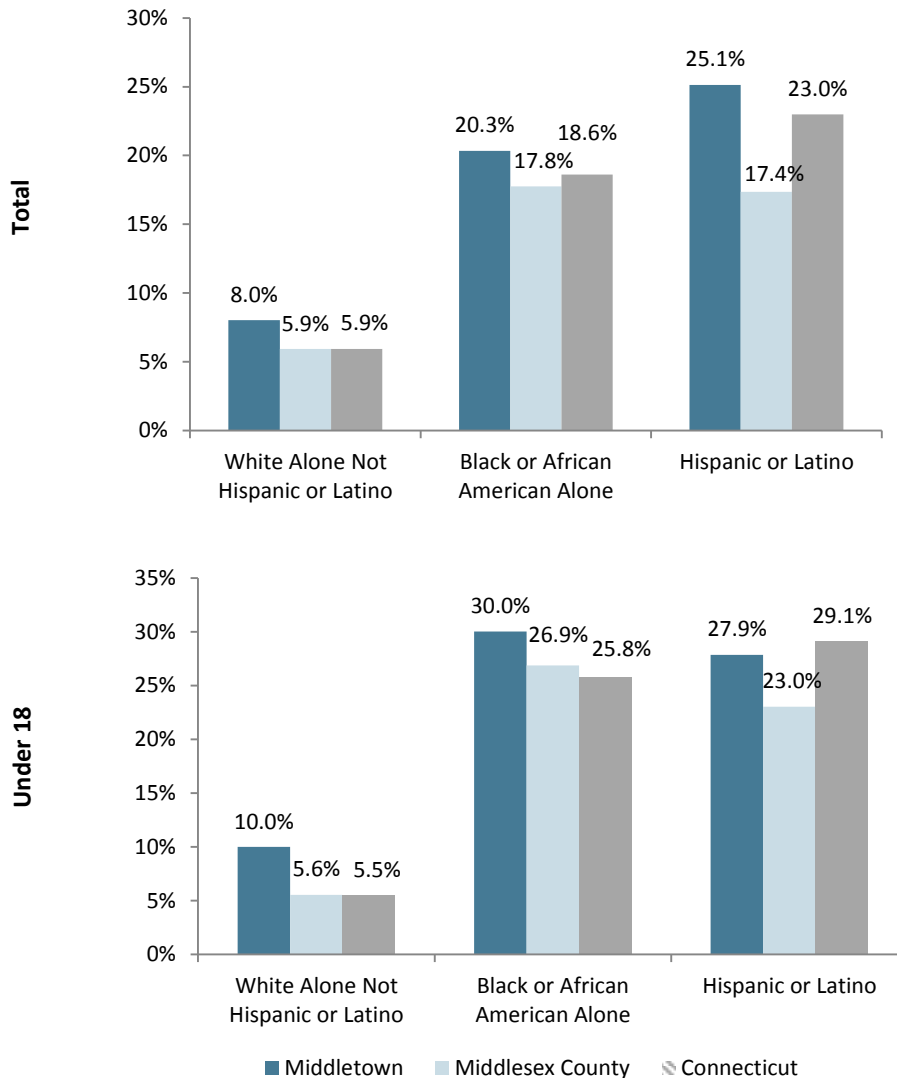
Middletown’s Total (11.3%) and Under 18 (15.5%) poverty rates exceed Connecticut’s rate of 10.1% and 13.5% respectively (Connecticut Data Collaborative, 2013-2017), with the towns of Clinton, Colchester, Cromwell, Deep River, Middlefield and Portland experiencing increased poverty status for the Under 18 category relative to the other towns in Middlesex Health’s service area (Table 13). Poverty rates are significantly more pronounced among the Black or African American Alone and Hispanic or Latino populations in Middletown and Middlesex County when compared to White Alone Not Hispanic or Latino for the Total and Under 18 categories (Figures 8 & 9).

Table 13 - Poverty Rate, 2013-2017

	Total %	Total % Under 18		Total %	Total % Under 18
Chester	4.0%	4.0%	Killingworth	3.4%	2.8%
Clinton	8.5%	9.2%	Lyme	2.2%	0.0%
Colchester	5.9%	10.0%	Marlborough	2.5%	0.0%
Cromwell	5.4%	7.1%	Middlefield	6.4%	12.6%
Deep River	6.0%	7.0%	Middletown	11.3%	15.5%
Durham	3.4%	0.0%	Old Lyme	2.7%	2.7%
East Haddam	4.8%	5.0%	Old Saybrook	4.8%	2.9%
East Hampton	5.7%	4.8%	Portland	7.3%	9.3%
Essex	5.0%	2.7%	Westbrook	7.8%	3.3%
Haddam	4.6%	3.5%	Middlesex County	7.2%	8.2%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

Figures 8 & 9 - Poverty Rate by Select Races and Hispanic or Latino Origin, 2013-2017



Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

EMPLOYMENT STATUS

The unemployment rates for the towns in Middlesex Heath's service area are lower than Connecticut's average of 4.1% (Connecticut Data Collaborative, 2018), except for Middletown, which mirrors the state rate (**Table 14**). Unemployment data by race and ethnicity was not able to be located.

Table 14 - Unemployment Rate, 2018

	Unemployment Rate		Unemployment Rate
Chester	2.9%	Killingworth	2.7%
Clinton	3.4%	Lyme	3.2%
Colchester	3.4%	Marlborough	3.2%
Cromwell	3.5%	Middlefield	3.3%
Deep River	3.3%	Middletown	4.0%
Durham	3.0%	Old Lyme	3.6%
East Haddam	3.5%	Old Saybrook	3.4%
East Hampton	3.4%	Portland	3.7%
Essex	3.2%	Westbrook	3.6%
Haddam	3.1%	Middlesex County	3.5%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

THE ALICE POPULATION

The Connecticut United Ways have raised awareness regarding the ALICE (Asset Limited, Income Constrained, Employed) demographic, specifically, Connecticut residents who are employed but are unable to cover the basic cost of living due to lack of a living wage/low and insufficient income. ALICE households earn more than the U.S. poverty level, but less than the ALICE threshold. In Middlesex County, the 2016 ALICE threshold and stability budgets were:

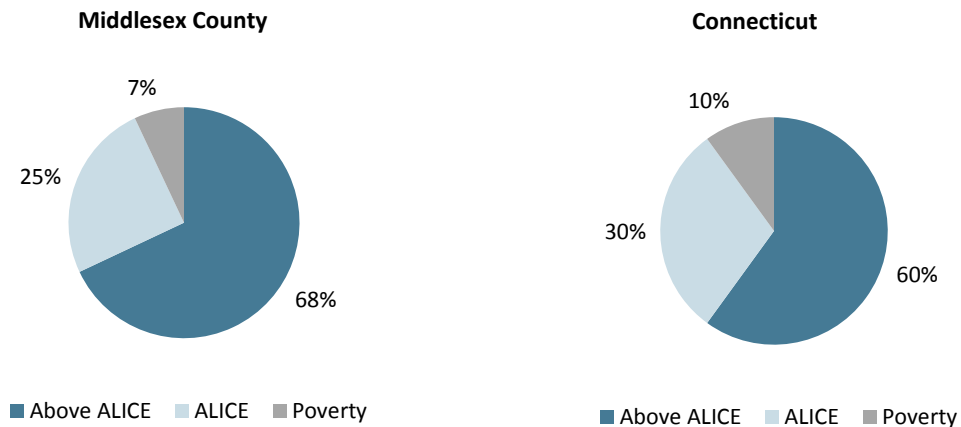
	ALICE Survival Budget	ALICE Stability Budget
Single Adult:	\$24,444	\$36,816
Married Couple:	\$36,012	\$60,456
One Adult and one School-Age Child:	\$40,620	\$70,968
One Adult and one Infant:	\$46,968	\$81,180
Two Adults and two School-Age Children:	\$63,852	\$114,192
Two Adults, one Infant and one Preschooler:	\$79,212	\$139,452

Source: Connecticut United Ways, Middlesex County, CT, 2016, *ALICE Household Survival Budget and ALICE Household Stability Budget*, <https://www.unitedforalice.org/>

In total, the percentage of ALICE households in Connecticut far exceeds the state's federal poverty statistics. When combining households in poverty and ALICE households, a picture of the true size of the population struggling to afford basic needs is revealed (Connecticut United Ways, 2018). For Middlesex County, the ALICE population is 25%, with 32% below the ALICE threshold (the ALICE Survival Budget),

when including those at poverty level, compared to a 30% ALICE population for Connecticut with 40% below the ALICE threshold, when including those at poverty level (**Figure 10**).

Figure 10 - ALICE Population, 2016



Source: Connecticut United Ways, https://alice.ctunitedway.org/meet_alice/middlesex/

When comparing the ALICE percentage for the towns of Middlesex County in relation to the state of Connecticut (30%), Middletown (44%), Deep River (37%), Old Saybrook (36%), Clinton (34%), Westbrook (33%) and Chester (31%) exceed the state average (**Table 15**).

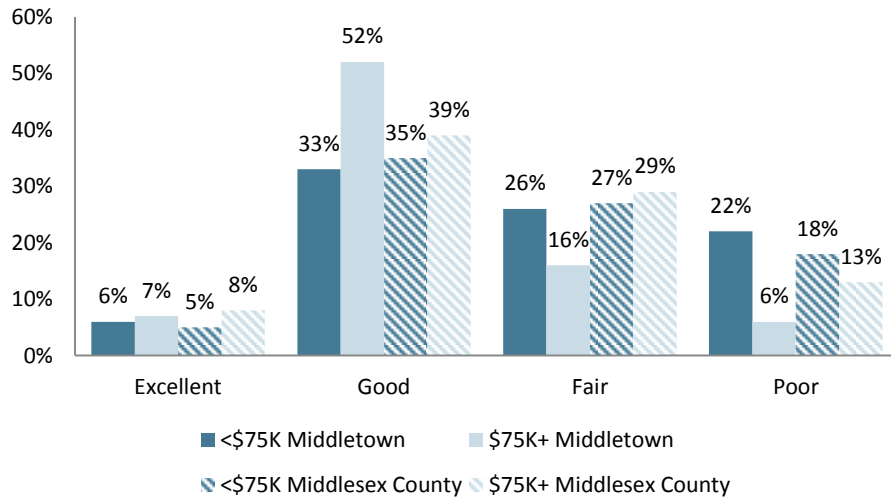
Table 15 - % ALICE Population, Towns in Middlesex County, 2016

	% ALICE		% ALICE
Chester	31%	Haddam	18%
Clinton	34%	Killingworth	17%
Cromwell	26%	Middlefield	25%
Deep River	37%	Middletown	44%
Durham	16%	Old Saybrook	36%
East Haddam	28%	Portland	29%
East Hampton	25%	Westbrook	33%
Essex	25%	Middlesex County	25%

Source: Connecticut United Ways. ALICE in Middlesex County, 2016 Point-In-time Data, https://alice.ctunitedway.org/meet_alice/middlesex/

The 2018 DataHaven Community Wellbeing Survey asked respondents to rate the ability to obtain suitable employment as excellent, good, fair, poor or don't know. For the total respondents to this question, a greater percentage earning less than \$75,000 stated the ability to find suitable employment was poor (22% in Middletown and 18% in Middlesex County) compared to those earning more than \$75,000 (6% in Middletown and 13% in Middlesex County), **Figure 11**.

Figure 11 - Ability to Obtain Suitable Employment by Income



Source: DataHaven Community Wellbeing Survey, 2018

EDUCATION LEVEL

The educational attainment for Middlesex County mirrors Connecticut, except in the outer bounds (percent of No High School Diploma and percent of Bachelor's Degree or Higher) for Middlesex County which indicate somewhat better rates when benchmarked against Connecticut (**Table 16**).

Table 16 - Educational Attainment Age 25+, 2017

	% No HS Diploma	% HS Degree Only	% Some college or Associate's Degree	% Bachelor's Degree Only	% Master's Degree or Higher	% Bachelor's Degree or Higher
Chester	4%	26%	28%	26%	16%	42%
Clinton	7%	27%	28%	23%	15%	38%
Cromwell	6%	23%	26%	26%	20%	46%
Deep River	4%	34%	25%	21%	17%	38%
Durham	4%	26%	22%	27%	21%	49%
East Haddam	7%	30%	29%	21%	14%	34%
East Hampton	5%	26%	30%	22%	17%	39%
Essex	4%	16%	25%	34%	21%	56%
Haddam	3%	25%	26%	25%	21%	46%
Killingworth	2%	25%	26%	22%	26%	48%
Middlefield	4%	35%	22%	18%	21%	39%
Middletown	8%	30%	26%	20%	17%	36%
Old Saybrook	6%	26%	25%	25%	18%	43%
Portland	6%	28%	28%	21%	18%	38%
Westbrook	9%	31%	18%	25%	18%	43%
Middlesex County	6%	27%	26%	23%	18%	41%
Connecticut	10%	27%	25%	22%	17%	39%

Source: American Community Survey (ACS) 5-year; DataHaven Analysis

All high school graduation rates in the school districts of Middlesex County are higher than the state of Connecticut at 87.9% (**Table 17**).

Table 17 - High School Graduation Rates, 2016-2017

School District	Graduation Rate	School District	Graduation Rate
Clinton School District	89.9%	Portland School District	93.1%
Colchester School District	91.5%	Regional School District 04	100.0%
East Hampton School District	95.5%	Regional School District 13	95.2%
Middletown School District	92.2%	Regional School District 17	95.4%
Old Saybrook School District	96.9%	Westbrook School District	91.9%

Regional School District 04 = Chester, Deep River, Essex

Regional School District 13 = Durham

Regional School District 17 = Haddam-Killingworth

Sources: Connecticut Data Collaborative, <http://data.ctdata.org/>; The Connecticut Department of Education (CSDE), <https://portal.ct.gov/Services/Education/K-12-Education/Schools-and-Districts>

HOUSING

All the towns in Middlesex Health's service area have a higher percentage of Owner Occupied when compared to Connecticut (66.6%), with the exception of Middletown at 52.6%, and a lower percentage of Renter Occupied in comparison to Connecticut (33.4%), except for Middletown at 47.4% (**Table 18**).

Table 18 - Housing Tenure, 2013-2017

	% Owner Occupied	% Renter Occupied		% Owner Occupied	% Renter Occupied
Chester	74.7%	25.3%	Killingworth	94.9%	5.1%
Clinton	79.0%	21.1%	Lyme	86.4%	13.6%
Colchester	75.9%	24.1%	Marlborough	90.2%	9.8%
Cromwell	78.3%	21.7%	Middlefield	86.3%	13.7%
Deep River	77.4%	22.6%	Middletown	52.6%	47.4%
Durham	90.8%	9.2%	Old Lyme	82.6%	17.4%
East Haddam	83.4%	16.6%	Old Saybrook	79.0%	21.0%
East Hampton	86.8%	13.2%	Portland	85.2%	14.8%
Essex	76.0%	24.0%	Westbrook	77.1%	22.9%
Haddam	86.2%	13.8%	Middlesex County	73.7%	26.3%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

Cost-burdened households are those that spend at least 30% of their annual household income on housing costs, and this cohort may frequently have little left over for living necessities, such as food, transportation, costs of health care, etc. While the majority of towns in Middlesex Health's service area experience a lower housing cost-burden rate when compared to Connecticut (40.7%), the percentage of households in the towns that are cost-burdened is high, ranging from 26.9% - 35.8%. The towns of Middletown and Westbrook compare to Connecticut, while Clinton, Lyme, Deep River and Old Saybrook exceed the state average with a range of 43.3% - 47.9% experiencing housing cost-burden (**Table 19**).

Table 19 - Cost-Burdened Households, 2013-2017

% Cost-Burdened Households		% Cost-Burdened Households	
Chester	32.4%	Killingworth	28.2%
Clinton	43.3%	Lyme	47.4%
Colchester	30.6%	Marlborough	31.5%
Cromwell	31.6%	Middlefield	30.4%
Deep River	47.8%	Middletown	39.0%
Durham	30.9%	Old Lyme	35.8%
East Haddam	35.4%	Old Saybrook	47.9%
East Hampton	26.9%	Portland	33.5%
Essex	35.4%	Westbrook	40.6%
Haddam	29.0%	Middlesex County	36.5%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

The majority of the towns in Middlesex Health’s service area have a considerably lower percentage of subsidized housing when compared to Connecticut (11.3%). Portland and Colchester are closer to the state average (8.3% and 8.7% respectively), and the City of Middletown (21.6%) greatly exceeds the state average (**Table 20**).

Table 20 - Subsidized Housing, 2017

% Subsidized Housing		% Subsidized Housing	
Chester	2.1%	Killingworth	1.1%
Clinton	2.3%	Lyme	0.8%
Colchester	8.7%	Marlborough	2.1%
Cromwell	6.5%	Middlefield	2.6%
Deep River	2.6%	Middletown	21.6%
Durham	1.9%	Old Lyme	1.6%
East Haddam	2.6%	Old Saybrook	2.4%
East Hampton	3.3%	Portland	8.3%
Essex	2.3%	Westbrook	5.0%
Haddam	1.4%	Middlesex County	8.6%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

Single parent families are those headed by a single parent with children under the age of 18. All of the towns in Middlesex Health’s service area with a single parent family (range of 10.2% - 22.7%) are lower than the Connecticut average (25.8%), except for the City of Middletown at 30.3% (**Table 21**).

Table 21 - Single Parent Families, 2013-2017

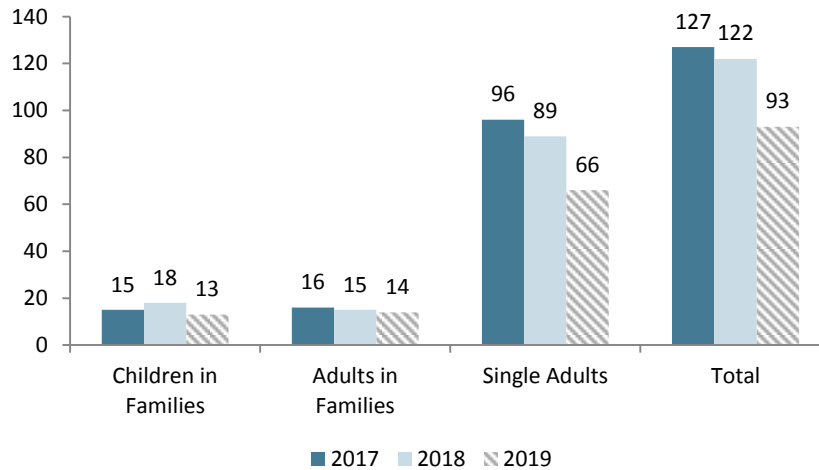
% Single Parent Families		% Single Parent Families	
Chester	17.3%	Killingworth	11.0%
Clinton	21.9%	Lyme	14.4%
Colchester	19.7%	Marlborough	12.5%
Cromwell	16.3%	Middlefield	14.4%
Deep River	20.3%	Middletown	30.3%
Durham	15.6%	Old Lyme	11.3%
East Haddam	13.3%	Old Saybrook	18.5%
East Hampton	11.1%	Portland	19.8%
Essex	14.6%	Westbrook	22.7%
Haddam	10.2%	Connecticut	25.8%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

HOMELESSNESS

The Connecticut Point-in-Time Count tracks people experiencing homelessness, both sheltered and unsheltered, throughout the state on a given point in time. **Figure 12** gives the Point-in-Time Count for Middlesex County for 2017 (January 24), 2018 (January 23), and 2019 (January 22) by children in families, adults in families, single adults and total.

Figure 12 - Homelessness Point-in Time Count, Middlesex County



Source: Connecticut Coalition to End Homelessness Point-in-Time Count Middlesex Summary 2017, 2018, 2019

Supportive housing is a cost effective model for reducing homelessness among individuals who experience mental illness or a substance use disorder. It combines affordable housing, usually through a rental subsidy, and intensive yet flexible support services (DMHAS, 2019). The Point-in-Time Count also tracks housing inventory by program and household type. The results for Middlesex County for 2017

(January 24), 2018 (January 23), and 2019 (January 22) are outlined in **Figures 13a** and **13b**. There was an increase in supportive housing vouchers in Middlesex County in 2019 for families and individuals, which points to additional supportive housing vouchers being identified as a need.

Figure 13a - Housing Inventory Point-in Time Count by Program and Families, Middlesex County

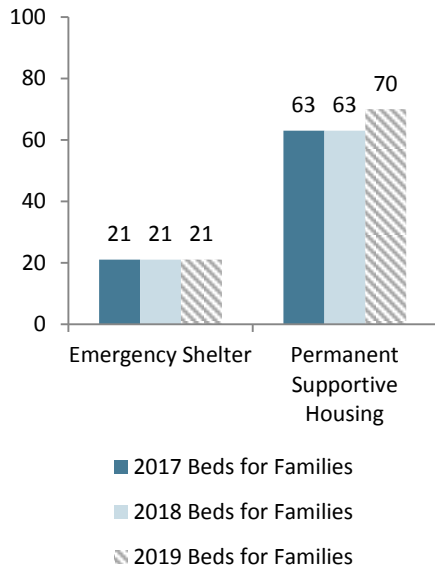
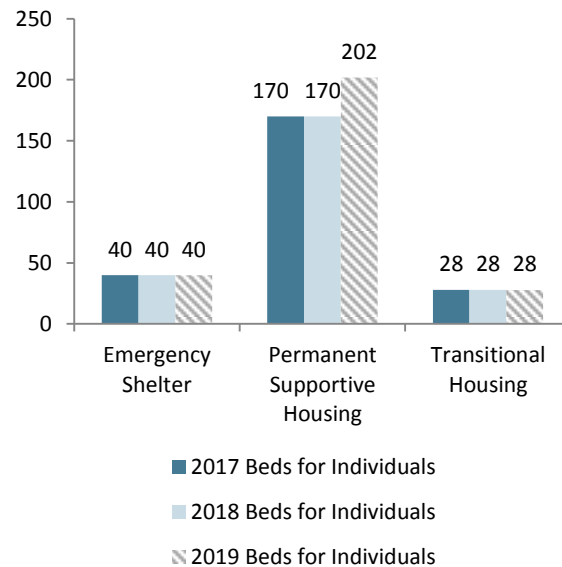


Figure 13b - Housing Inventory Point-in Time Count by Program and Individuals, Middlesex County



Source: Connecticut Coalition to End Homelessness Point-in-Time Count, Middlesex Summary 2017, 2018, 2019

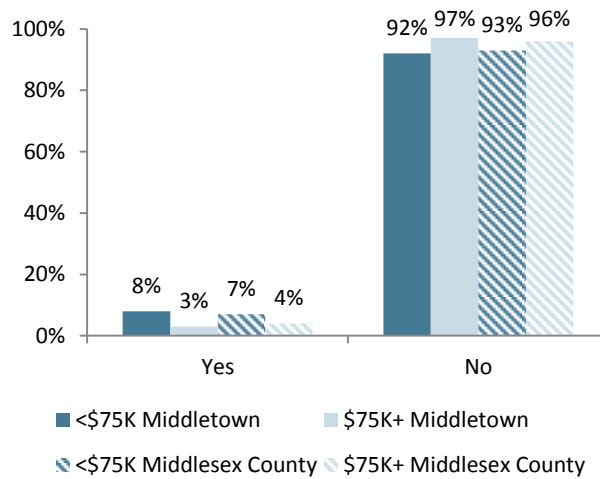
The 2018 DataHaven Community Wellbeing Survey asked respondents questions about ability to afford shelter, specifically, “*in the last 12 months, have you not had enough money to provide adequate shelter or housing for you or your family?*”. **Table 22** indicates consistency with Middletown and Middlesex County when benchmarked against the state. Those respondents earning less than \$75,000 have increased difficulty when compared to those with incomes of \$75,000 and above (**Figure 14**).

Table 22 - Shelter, “Inability to Afford Housing in the Past 12 months?”

	Total	Gender	
		Male	Female
Middletown			
Yes	6%	3%	9%
No	94%	97%	91%
Middlesex County			
Yes	6%	6%	6%
No	94%	94%	94%
Connecticut			
Yes	8%	8%	8%
No	92%	92%	92%

Source: DataHaven Community Wellbeing Survey, 2018

Figure 14 - Shelter, “Inability to Afford Housing in the Past 12 months?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

LIVING ENVIRONMENT

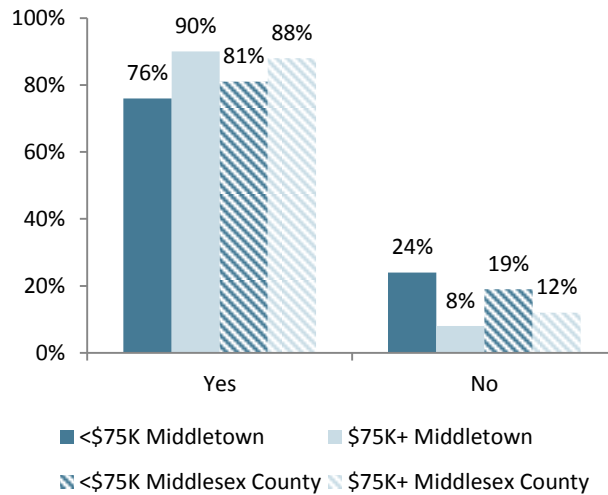
The 2018 DataHaven Community Wellbeing Survey asked a series of questions about the neighborhood and areas in which people live, asking respondents to answer yes/no or to select their level of agreement with various categories regarding living environment questions and statements. In response to the question, “are you satisfied with the city or area where you live?”, female respondents in Middletown and Middlesex County were less satisfied when compared to male respondents (**Table 23**), with respondents earning less than \$75,000 expressing less satisfaction when compared to those with incomes of \$75,000 and above (**Figure 15**).

Table 23 - Living Environment, “Are You Satisfied with where You Live?”

	Total	Gender	
		Male	Female
Middletown			
Yes	83%	90%	77%
No	16%	9%	22%
Middlesex County			
Yes	85%	90%	80%
No	15%	10%	20%
Connecticut			
Yes	81%	81%	80%
No	18%	18%	19%

Source: DataHaven Community Wellbeing Survey, 2018

Figure 15 - Living Environment, “Are You Satisfied with where You Live?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

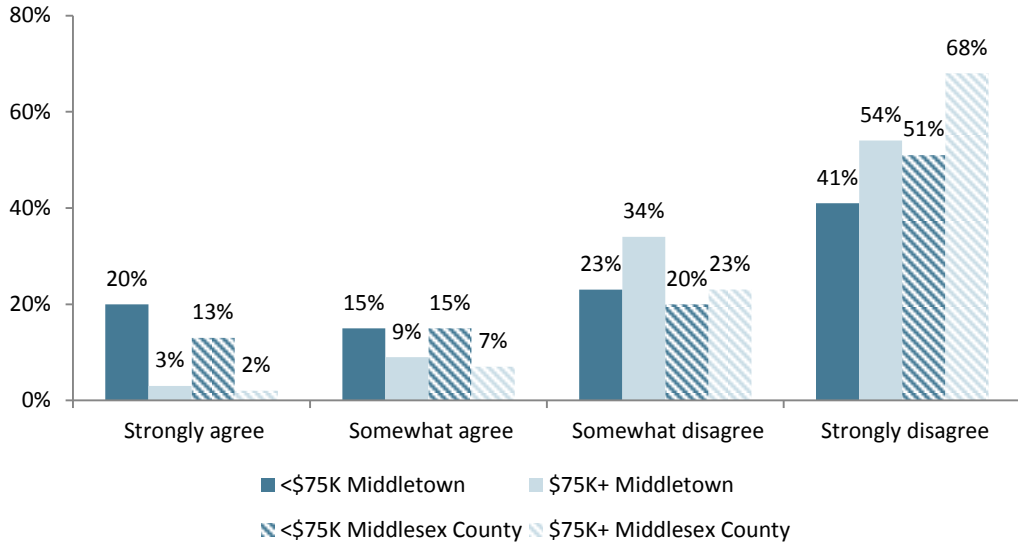
Regarding safety, in response to the 2018 DataHaven Community Wellbeing Survey statement “*I do not feel safe to go on walks in my neighborhood at night*”, Middletown aligns with Connecticut, with women feeling less safe when compared to men (**Table 24**). Income impacts level of feeling safe, with those who earn less than \$75,000 feeling less safe (20% of the respondents) compared to those earning \$75,000 and above (3% of respondents) in Middletown. A similar gap is seen for Middlesex County by income comparisons (13% and 2% respectively), **Figure 16**.

Table 24 - Feeling of Safety, “I do Not Feel Safe on Walks at Night”

	Total	Gender	
		Male	Female
Middletown			
Strongly agree	13%	7%	19%
Somewhat agree	12%	9%	15%
Somewhat disagree	28%	31%	26%
Strongly disagree	46%	53%	39%
Middlesex County			
Strongly agree	8%	5%	10%
Somewhat agree	10%	5%	16%
Somewhat disagree	22%	19%	24%
Strongly disagree	59%	70%	49%
Connecticut			
Strongly agree	14%	12%	16%
Somewhat agree	15%	13%	18%
Somewhat disagree	20%	17%	23%
Strongly disagree	49%	56%	41%

Source: DataHaven Community Wellbeing Survey, 2018

Figure 16 - Feeling of Safety, “I do Not Feel Safe on Walks at Night” by Income



Source: DataHaven Community Wellbeing Survey, 2018

To measure trust, the 2018 DataHaven Community Wellbeing Survey asked respondents to select level of agreement to the statement “*people in this neighborhood can be trusted*”. There is less of a sense of trust among Middletown respondents when benchmarked against Middlesex County and Connecticut, with women in both Middletown and Middlesex County expressing lower feelings of trust when compared to men (**Table 25**).

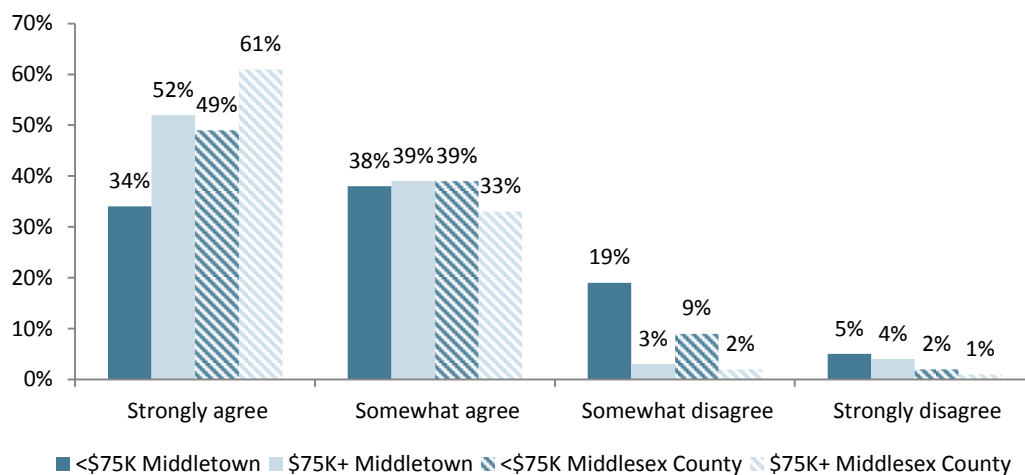
Table 25 - Feeling of Trust, “People in this Neighborhood can be Trusted”

	Total	Gender	
		Male	Female
Middletown			
Strongly agree	41%	47%	36%
Somewhat agree	39%	40%	38%
Somewhat disagree	12%	9%	15%
Strongly disagree	4%	1%	7%
Middlesex County			
Strongly agree	55%	60%	50%
Somewhat agree	35%	31%	39%
Somewhat disagree	5%	3%	7%
Strongly disagree	2%	2%	2%
Connecticut			
Strongly agree	47%	50%	45%
Somewhat agree	36%	34%	38%
Somewhat disagree	8%	8%	9%
Strongly disagree	6%	6%	7%

Source: DataHaven Community Wellbeing Survey, 2018

Income influences level of feelings of trust with 34% of the respondents from Middletown and 49% of the respondents from Middlesex County earning less than \$75,000 strongly agreeing with the statement “people in this neighborhood can be trusted” compared to 52% of the respondents from Middletown and 61% of the respondents in Middlesex County earning \$75,000 and above (Figure 17).

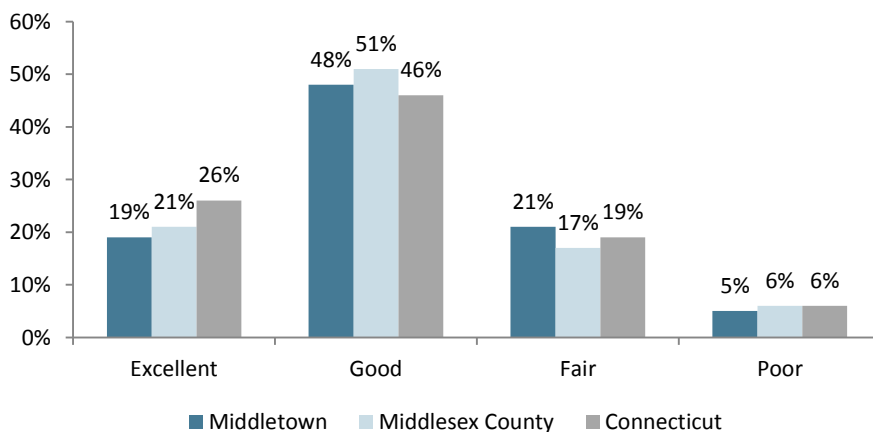
Figure 17 - Feeling of Trust, “People in this Neighborhood can be Trusted” by Income



Source: DataHaven Community Wellbeing Survey, 2018

2018 DataHaven Community Wellbeing Survey respondents were asked to rate “the condition of public parks and other public recreational facilities”. There was alignment between Middletown, Middlesex County, and Connecticut for the “good” response, but a variance for “excellent”, with 19% of respondents from Middletown and 21% from Middlesex County expressing the most favorable ranking compared to 26% for Connecticut (Figure 18).

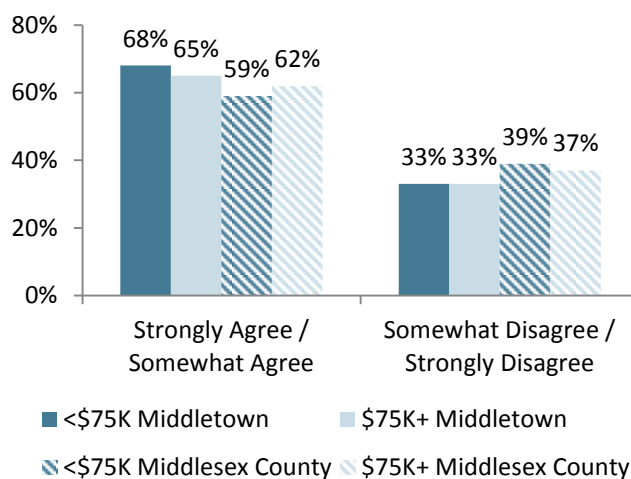
Figure 18 - Condition of Public Parks and Recreational Facilities



Source: DataHaven Community Wellbeing Survey, 2018

Regarding recreation options in the area around their home, defined as within a 10 or 15 minute walk, the 2018 DataHaven Community Wellbeing Survey respondents were asked how much they agreed or disagreed with the statement “my neighborhood has several free or low cost recreation facilities such as parks, playgrounds, public swimming pools, etc.”. Those responding from Middlesex County disagreed with the statement at a higher rate for both income levels when compared to Middletown (Figure 19).

Figure 19 - Availability of Free or Low Cost Recreation Facilities in Neighborhood by Income



Source: DataHaven Community Wellbeing Survey, 2018

Availability of positive role models for young people was measured by the 2018 DataHaven Community Wellbeing Survey through the statement “children and youth in my town generally have the positive role models they need around here”. There was a lower percentage of “strongly agree” in Middletown in total and for the male and female categories when compared to Middlesex County and CT (Table 26).

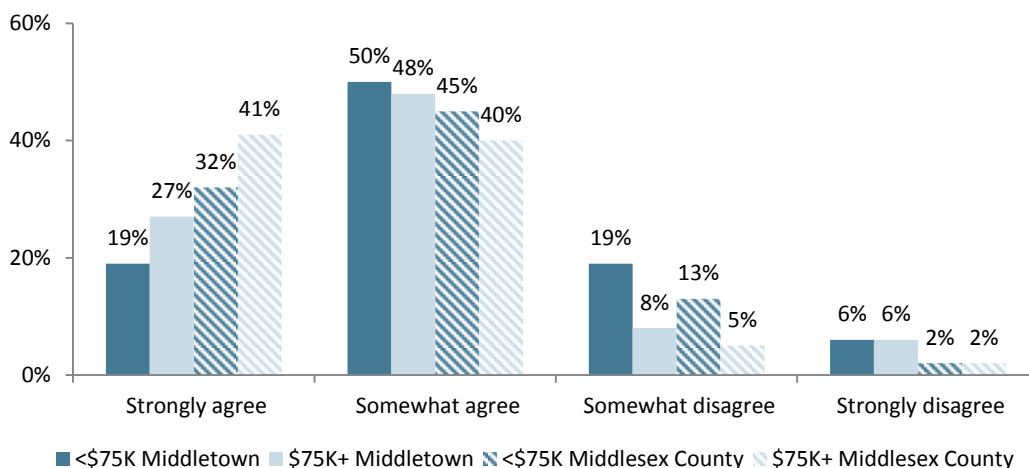
Table 26 - Role Models, “Children and Youth have Positive Role Models”

	Total	Gender	
		Male	Female
Middletown			
Strongly agree	23%	26%	21%
Somewhat agree	48%	41%	54%
Somewhat disagree	15%	17%	13%
Strongly disagree	5%	3%	8%
Middlesex County			
Strongly agree	37%	38%	35%
Somewhat agree	42%	38%	47%
Somewhat disagree	9%	9%	9%
Strongly disagree	2%	2%	3%
Connecticut			
Strongly agree	32%	32%	31%
Somewhat agree	41%	41%	41%
Somewhat disagree	13%	11%	14%
Strongly disagree	8%	8%	8%

Source: DataHaven Community Wellbeing Survey, 2018

By income, those earning less than \$75,000 (19% of the respondents from Middletown and 32% of the respondents from Middlesex County) were less likely to “strongly agree” with availability of sufficient positive role models for children and youth in their neighborhoods when compared to those earning \$75,000 and above (27% of the respondents from Middletown and 41% of respondents from Middlesex County), **Figure 20**.

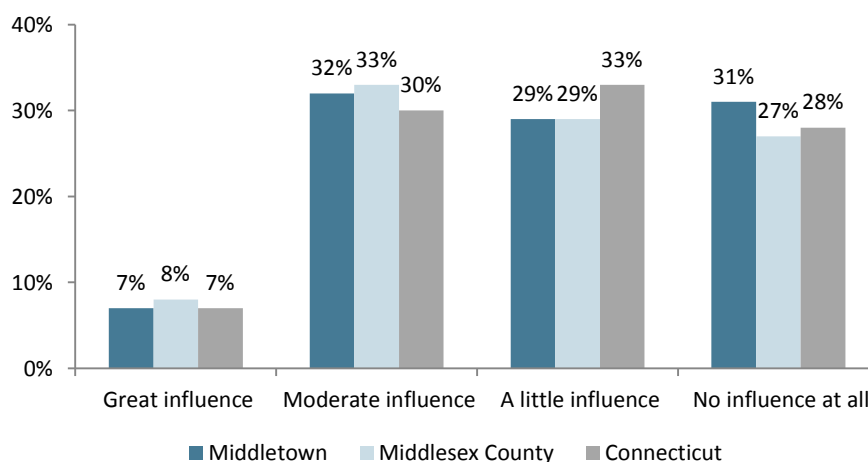
Figure 20 - Role Models, “Children and Youth have Positive Role Models” by Income



Source: DataHaven Community Wellbeing Survey, 2018

Regarding degree of influence, 2018 DataHaven Community Wellbeing Survey respondents were asked to “describe your ability to influence local-government decision making” by selecting a response ranging from “great influence” to “no influence at all”. There was agreement between Middletown, Middlesex County and Connecticut in all response options, with a high degree of feelings of lack of influence (**Figure 21**).

Figure 21 - Influence on Local Government Decision Making

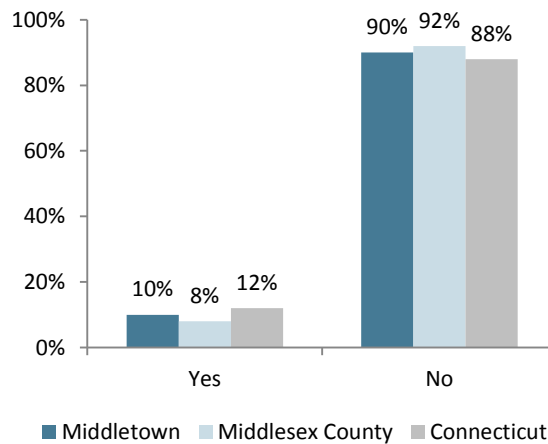


Source: DataHaven Community Wellbeing Survey, 2018

TRANSPORTATION

The 2018 DataHaven Community Wellbeing Survey asked respondents questions about transportation to measure transportation insecurity. In answer to the question, “*in the past 12 months, did you stay home when you needed or wanted to go someplace because you had no access to reliable transportation?*”, respondents in Middletown experience more transportation insecurity (10%) than Middlesex County (8%), but less than Connecticut (12%), **Figure 22**.

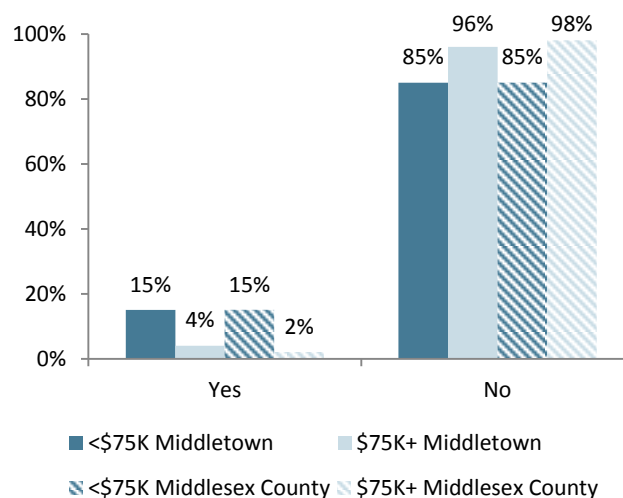
Figure 22 - Transportation Insecurity



Source: DataHaven Community Wellbeing Survey, 2018

Income level is associated with access to reliable transportation with 15% of the 2018 DataHaven Community Wellbeing Survey respondents with incomes lower than \$75,000 experiencing higher transportation insecurity for both Middletown and Middlesex County compared to 4% (Middletown) and 2% (Middlesex County) of respondents earning \$75,000 and above (**Figure 23**).

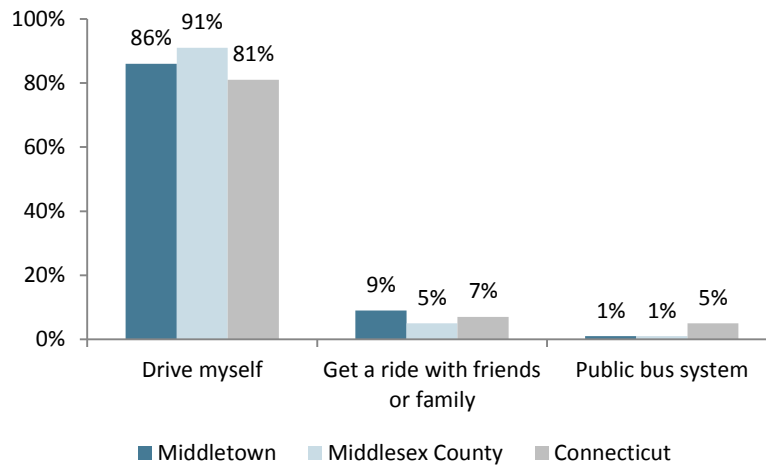
Figure 23 - Transportation Insecurity by Income



Source: DataHaven Community Wellbeing Survey, 2018

In response to the question, “*what is your primary means of transportation to work, school, or the place where you spend most of your time outside of home?*”, 9% of the 2018 DataHaven Community Wellbeing Survey respondents from Middletown get a ride with family or friends compared to 5% in Middlesex County and 7% in Connecticut (**Figure 24**).

Figure 24 - Primary Means of Transportation



Source: DataHaven Community Wellbeing Survey, 2018

FOOD INSECURITY

Food insecurity impacts every community in the United States. It is defined as disrupted food intake or eating patterns due to lack of money and other resources (Healthy People 2020; USDA, 2005). Nationally, food insecurity is more prevalent in low-income households, with disparities in Black non-Hispanic and Hispanic households. Additional populations are at higher risk for food insecurity including children and older adults. Limited access to full-service supermarkets and grocery stores, communities that lack affordable and nutritious food (i.e. “food deserts”), and transportation issues can also contribute to food insecurity (Healthy People 2020). **Table 27** outlines the food insecurity rates in the towns in Middlesex Health’s service area, compared to Connecticut at 11.6%. The City of Middletown at 14.5% exceeds the Connecticut food insecurity rate, and Clinton is close to Connecticut at 10.7%.

The Supplemental Nutrition Assistance Program (SNAP) is an indicator of food insecurity. SNAP is a food-purchasing assistance program administered by the U.S. Department of Agriculture (USDA) under the Food and Nutrition Service, with benefits distributed locally in each state. SNAP provides a hunger safety net for low- and no-income individuals and families. All of the towns in Middlesex Health’s service area are below Connecticut’s SNAP average (12.4%), except for the City of Middletown at 15.1% (**Table 28**).

Table 27 - Food Insecurity Rates (% relative to CT SNAP Average of 12.4%)

Overall %		Overall %	
Chester	8.9%	Killingworth	6.4%
Clinton	10.7%	Lyme	8.4%
Colchester	9.8%	Marlborough	6.9%
Cromwell	8.8%	Middlefield	6.8%
Deep River	9.1%	Middletown	14.5%
Durham	6.0%	Old Lyme	8.3%
East Haddam	8.7%	Old Saybrook	8.7%
East Hampton	7.7%	Portland	8.5%
Essex	9.9%	Westbrook	10.9%
Haddam	8.4%	Middlesex County	9.9%

1. Source 1: Connecticut Food Bank; Hunger in CT; <http://www.ctfoodbank.org/about-us/hunger-in-connecticut>
2. Source 2: Gunderson, C., Dewey, A., Crumbaugh, A., Kato, M., Engelhard, E., Map the Meal Gap 2018: A Report on County and Congressional District Food Insecurity and County Food Cost in the United States in 2016. Feeding America, 2018; <https://map.feedingamerica.org/county/2016/child/connecticut/county/middlesex>
3. Source 3: U.S. Census Bureau: 2012-2016 American Community Survey 5-Year Estimates

Table 28 - SNAP Recipients, 2013-2017

% of SNAP Recipients		% of SNAP Recipients	
Chester	3.9%	Killingworth	2.9%
Clinton	6.8%	Lyme	1.1%
Colchester	5.5%	Marlborough	4.1%
Cromwell	6.8%	Middlefield	9.4%
Deep River	4.0%	Middletown	15.1%
Durham	2.6%	Old Lyme	3.2%
East Haddam	6.6%	Old Saybrook	5.6%
East Hampton	5.1%	Portland	6.2%
Essex	3.9%	Westbrook	7.0%
Haddam	5.2%	Middlesex County	8.3%

Source: Connecticut Data Collaborative, <http://data.ctdata.org/>; American Community Survey (ACS) 5-Year estimates

To measure food insecurity, the 2018 DataHaven Community Wellbeing Survey asked respondents a question about ability to purchase food, “*have there been times in the past 12 months when you did not have enough money to buy food that you or your family needed?*”. For the total respondents to this question, a greater percentage in Middletown experience food insecurity when benchmarked against Middlesex County and Connecticut (**Table 29**). 15% of the respondents from Middletown answered “yes”, compared to Middlesex County (9%) and Connecticut (13%). A greater percentage of women from Middletown answered “yes” (21%) compared to men from Middletown (7%), which is also higher than female respondents from Middlesex County (9%) and Connecticut (15%).

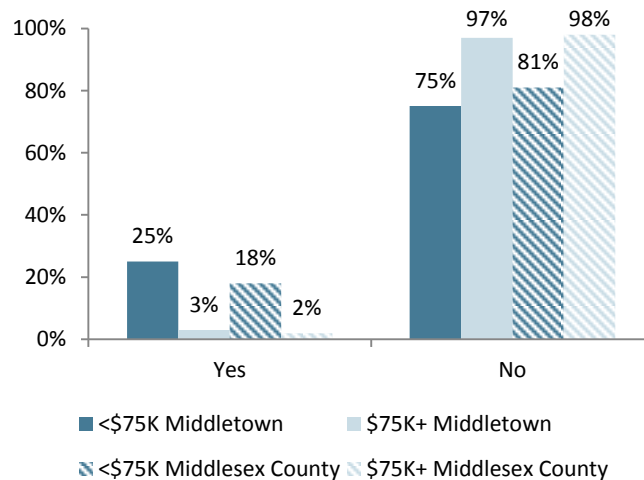
Table 29 - Food Insecurity, “Unable to Buy Food in the Past 12 Months?”

	Total	Gender	
		Male	Female
Middletown			
Yes	15%	7%	21%
No	85%	93%	78%
Middlesex County			
Yes	9%	9%	9%
No	91%	90%	91%
Connecticut			
Yes	13%	11%	15%
No	87%	89%	84%

Source: DataHaven Community Wellbeing Survey, 2018

Income level is associated with food insecurity. 25% of the 2018 DataHaven Community Wellbeing Survey respondents from Middletown and 18% of respondents from Middlesex County with incomes lower than \$75,000 experienced food insecurity compared those earning \$75,000 and above for Middletown (3%) and Middlesex County (2%), **Figure 25**.

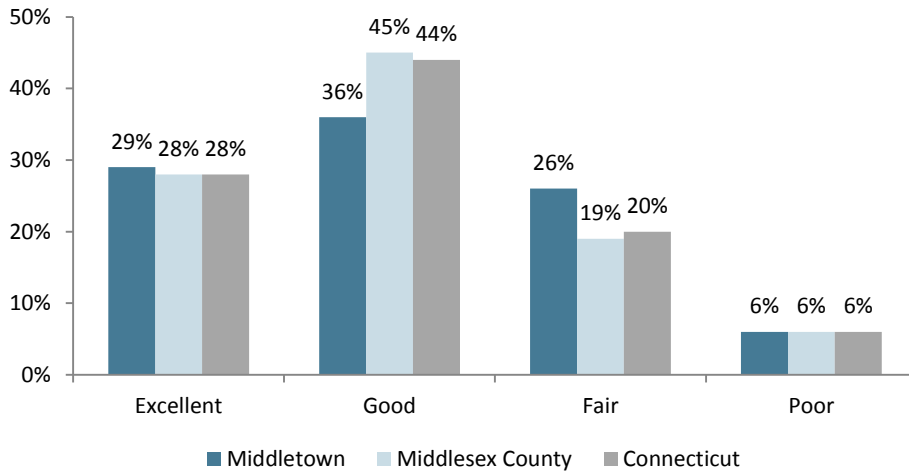
Figure 25 - Food Insecurity, “Unable to Buy Food in the Past 12 Months?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

The 2018 DataHaven Community Wellbeing Survey asked respondents to rank the availability of affordable, high-quality fruits and vegetables in the areas in which they live. Per option, most respondents answered “good”. Less Middletown respondents answered “good” and more answered “fair” when compared to Middlesex County and Connecticut in the “good” and “fair” response options (**Figure 26**).

Figure 26 - Availability of High Quality Fruits and Vegetables



Source: DataHaven Community Wellbeing Survey, 2018

ACCESS TO HEALTH CARE SERVICES

Access to quality and comprehensive health care services is critical for 1) promoting and maintaining health; 2) preventing and managing disease; 3) reducing unnecessary disability; 4) reducing premature death; and 5) promoting and achieving health equity (Healthy People 2020). Access to health care also includes oral health and the ability to obtain necessary prescription drugs. In totality, access to health care services impacts overall physical, social, and mental health status and quality of life. Healthy People 2020 identifies three integral components for sufficient access to health services:

	Element	Benefit	Barriers
1	Insurance Coverage	<ul style="list-style-type: none"> Allows for entry to the health care system 	<ul style="list-style-type: none"> High cost care/medical bill burden Inadequate/no insurance coverage Lack of availability of services Lack of culturally competent care
2	Health Services	<ul style="list-style-type: none"> People with a usual source of care have better health outcomes, fewer disparities, and lower costs 	
3	Timeliness of Care	<ul style="list-style-type: none"> Allows for health care services to be provided quickly after a need is recognized 	

Source: Healthy People 2020, <https://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>

All towns in Middlesex Health’s service area have a lower uninsured rate when compared to Connecticut (6.4%), except Clinton (8.1%), Deep River (8.1%) and Westbrook (6.9%). Deep River is the only town in Middlesex Health’s service area that has a slightly lower private insurance rate when compared to Connecticut. All towns in Middlesex Health’s service area have a lower percentage of public health insurance when compared to Connecticut (33.4%), except Old Saybrook (41.6%), Lyme (40.1%), Old Lyme (37.2%), Essex (36.7%) and Chester (35.3%), which is likely due to higher Medicare enrollment given the age distribution of those towns (**Table 30**).

Table 30 - Health Insurance Coverage, 2013-2017

	Without Health Insurance	With Private Health Insurance	With Public Health Insurance		Without Health Insurance	With Private Health Insurance	With Public Health Insurance
Chester	3.5%	78.3%	35.3%	Killingworth	3.0%	86.1%	27.3%
Clinton	8.1%	76.3%	29.5%	Lyme	2.5%	76.1%	40.1%
Colchester	1.8%	85.5%	23.8%	Marlborough	2.8%	85.6%	23.9%
Cromwell	3.6%	84.8%	25.3%	Middlefield	2.2%	84.5%	27.1%
Deep River	8.1%	70.6%	31.8%	Middletown	3.8%	75.0%	31.9%
Durham	2.5%	91.5%	20.6%	Old Lyme	2.7%	81.2%	37.2%
East Haddam	5.1%	82.7%	26.4%	Old Saybrook	5.8%	72.2%	41.6%
East Hampton	1.6%	84.4%	26.5%	Portland	2.4%	81.1%	31.7%
Essex	2.5%	83.3%	36.7%	Westbrook	6.9%	80.2%	29.6%
Haddam	3.1%	86.1%	25.2%	Connecticut	6.4%	71.8%	33.4%

Source: Connecticut Data Collaborative,

Note: the American Community Survey (ACS), original data source, defines private coverage as including employment-based, direct-purchase, and TRICARE. Public coverage is defined as Medicaid, Medicare, and VA Care

Middlesex County has fewer primary care physicians and dentists both by rate per 100,000 population and by ratio of population to providers when compared to Connecticut, but has more mental health providers when benchmarked against the state by rate per 100,000 population and ratio of population to providers (**Table 31**).

Table 31 - Provider Rate and Ratio

	Middlesex County	Connecticut	U.S. Overall
Rate of Providers (per 100,000 population)			
Primary Care Physician Rate	72	85	---
Dentist Rate	78	85	---
Mental Health Provider Rate	410	365	
Ratio of Population to Providers			
Primary Care Physician Ratio	1384:1	1180:1	1,330:1
Dentist Ratio	1287:1	1172:1	1,460:1
Mental Health Provider Ratio	244:1	274:1	440:1

County Health Rankings & Roadmaps 2019, <https://www.countyhealthrankings.org/reports/2019-county-health-rankings-key-findings-report>

Original data sources:

Primary Care Provider ratio = Area Health Resource File/American Medical Association (2016)

Dentist ratio = Area Health Resource File/National Provider Identification file (2017)

Mental Health Provide ratio = CMS, National Provider Identification file (2018)

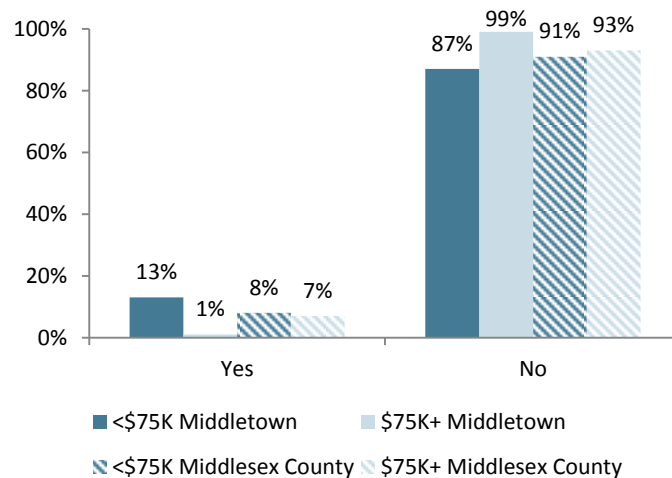
The 2018 DataHaven Community Wellbeing Survey asked respondents a series of questions about access to health care services. For medical care, when asked, “during the past 12 months, was there any time when you didn’t get the medical care you needed?”, there is alignment between total respondents for Middletown, Middlesex County and Connecticut (**Table 32**). By income, a higher percentage of those earning less than \$75,000 in Middletown (13%) and Middlesex County (8%) expressed not getting needed medical care when compared to those earning \$75,000 and above for Middletown (1%) and Middlesex County (7%), **Figure 27**.

Table 32 - Access, “Inability to Get Medical Care in the Past 12 Months?”

	Gender		
	Total	Male	Female
Middletown			
Yes	7%	4%	10%
No	92%	96%	89%
Middlesex County			
Yes	7%	6%	7%
No	93%	94%	92%
Connecticut			
Yes	9%	9%	9%
No	90%	91%	90%

Source: DataHaven Community Wellbeing Survey, 2018

Figure 27 - Access, “Inability to Get Medical Care in the Past 12 Months?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

Regarding postponement of care, the 2018 DataHaven Community Wellbeing Survey asked respondents, “during the past 12 months, was there any time when you put off or postponed getting medical care you thought you needed?”. There is agreement between total respondents for Middletown, Middlesex County and Connecticut (**Table 33**), with women in all cohorts reporting a higher rate of postponement of seeking

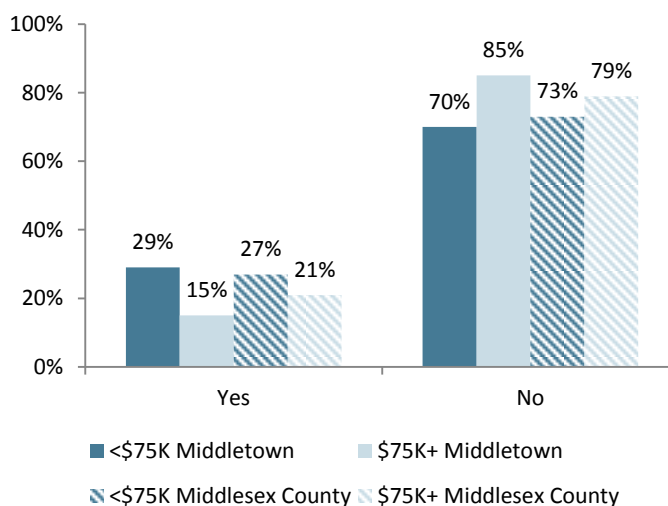
medical care when compared to men. By income, there is a significant differential for those earning less than \$75,000 with regard to postponing care more frequently in Middletown (29%) and Middlesex County (27%) compared to those earning \$75,000 and above for Middletown (15%) and Middlesex County (21%), **Figure 28**.

Table 33 - Access, "Postponement of Getting Medical Care in the Past 12 Months?"

	Total	Gender	
		Male	Female
Middletown			
Yes	24%	12%	35%
No	76%	88%	65%
Middlesex County			
Yes	23%	19%	26%
No	77%	80%	73%
Connecticut			
Yes	23%	20%	26%
No	77%	80%	74%

Source: DataHaven Community Wellbeing Survey, 2018

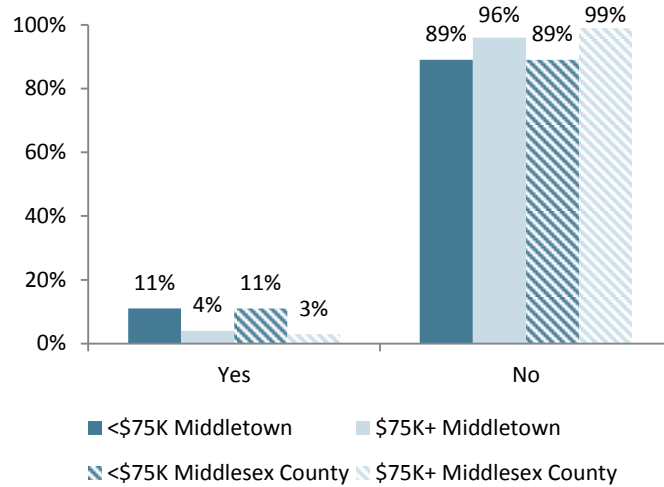
Figure 28 - Access, "Postponement of Getting Medical Care in the Past 12 Months?" by Income



Source: DataHaven Community Wellbeing Survey, 2018

Income continues to be a driver for access. In response to the 2018 DataHaven Community Wellbeing Survey question, "during the past 12 month, was there any time you needed prescription medicines but didn't get them because you couldn't afford it?", those earning less than \$75,000 for Middletown (11%) and Middlesex County (11%) responded that they didn't get prescriptions due to cost compared to those with incomes \$75,000 and above for Middletown (4%) and Middlesex County (3%), **Figure 29**, while the total respondents for Middletown, Middlesex County and Connecticut are consistent (**Table 34**).

Figure 29 - Access, “Inability to Afford Prescriptions in the Past 12 Months?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

Table 34 - Access, “Inability to Afford Prescriptions in the Past 12 Months?”

	Total	Gender	
		Male	Female
Middletown			
Yes	24%	12%	35%
No	76%	88%	65%
Middlesex County			
Yes	23%	19%	26%
No	77%	80%	73%
Connecticut			
Yes	23%	20%	26%
No	77%	80%	74%

Source: DataHaven Community Wellbeing Survey, 2018

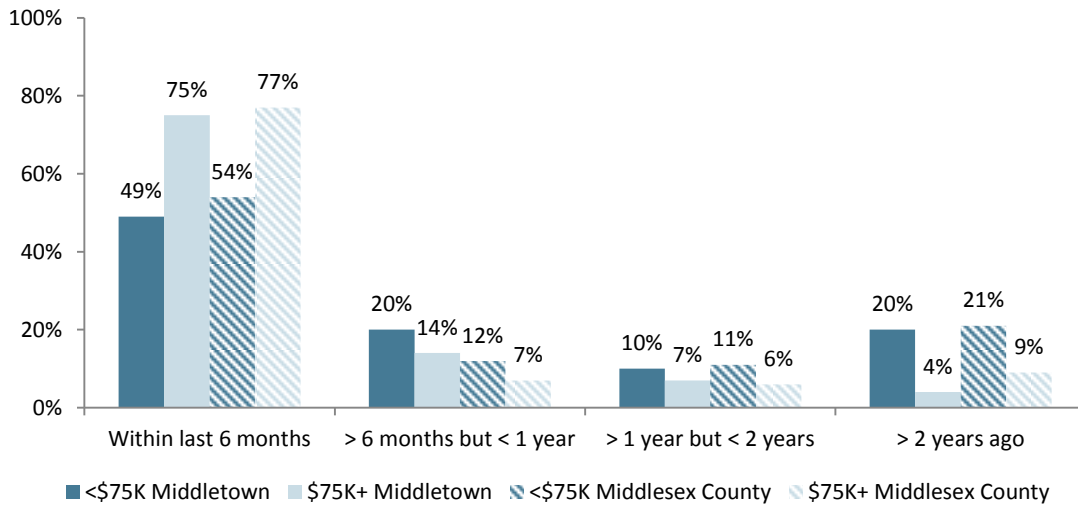
The 2018 DataHaven Community Wellbeing Survey also asked respondents about dental care, specifically, “when was the last time you were seen by a dentist, was it...”, providing a series of time-frame options (**Table 35**). By income, dental care visits drop in the “within the last 6 months” category for respondents earning less than \$75,000 in Middletown and Middlesex County, and increase for those earning \$75,000 and above. A similar income trend is seen in the “more than two years ago” responses for Middletown and Middlesex County (**Figure 30**).

Table 35 - Last Time Seen by a Dentist

	Total	Gender	
		Male	Female
Middletown			
Within the last 6 months	59%	65%	54%
More than 6 months but less than a year	16%	11%	21%
More than a year but less than two years	9%	11%	7%
More than two years ago	15%	13%	17%
Middlesex County			
Within the last 6 months	67%	67%	66%
More than 6 months but less than a year	9%	9%	9%
More than a year but less than two years	9%	11%	7%
More than two years ago	14%	13%	16%
Connecticut			
Within the last 6 months	60%	59%	62%
More than 6 months but less than a year	14%	14%	14%
More than a year but less than two years	11%	11%	11%
More than two years ago	13%	14%	12%

Source: DataHaven Community Wellbeing Survey, 2018

Figure 30 - Last Time Seen by a Dentist by Income



Source: DataHaven Community Wellbeing Survey, 2018

The key informant survey included a question about access to health care services and asked respondents to rank 16 health care access/availability related statements relative to their communities using a Likert scale of 1 - 5 with 1 = strongly disagree; 3 = moderately/somewhat agree; and 5 = strongly agree. A response option of “do not know” was provided. **Figures 31a, 31b** and **32** present the top five statements with which the community and hospital respondents strongly agreed and strongly disagreed. There is alignment between the two cohorts for four out of the top five responses for “strongly agree” and complete agreement for the top five “strongly disagree” responses. The ranking of all 16 statements (by “strongly agree” and “strongly disagree”) for community and hospital can be found in **Tables A7a** and **A7b & A8a** and **A8b** in the **Appendix**.

Figure 31a - Key Informant Survey, Access to Health Care Services, “Strongly Agree”, Community Respondents

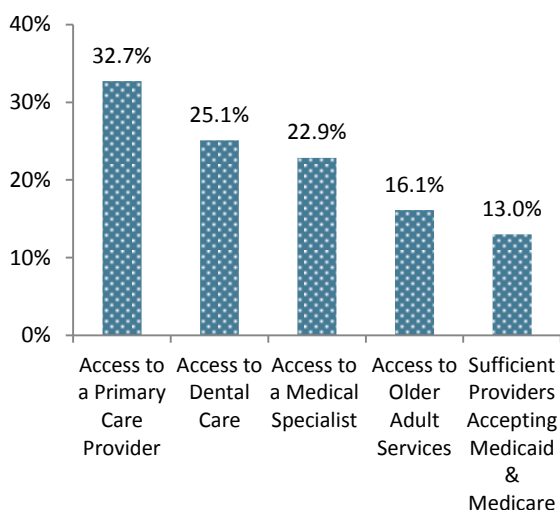


Figure 31b - Key Informant Survey, Access to Health Care Services, “Strongly Agree”, Hospital Respondents

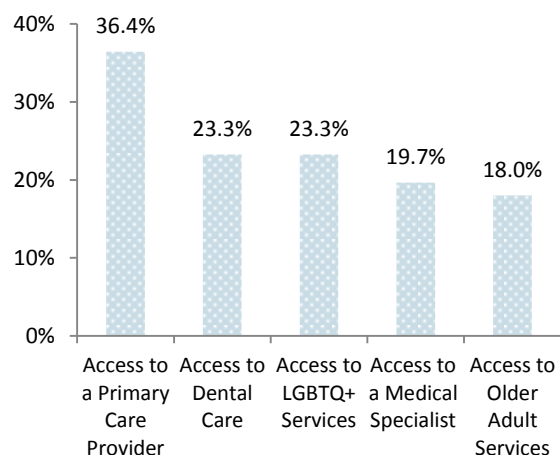
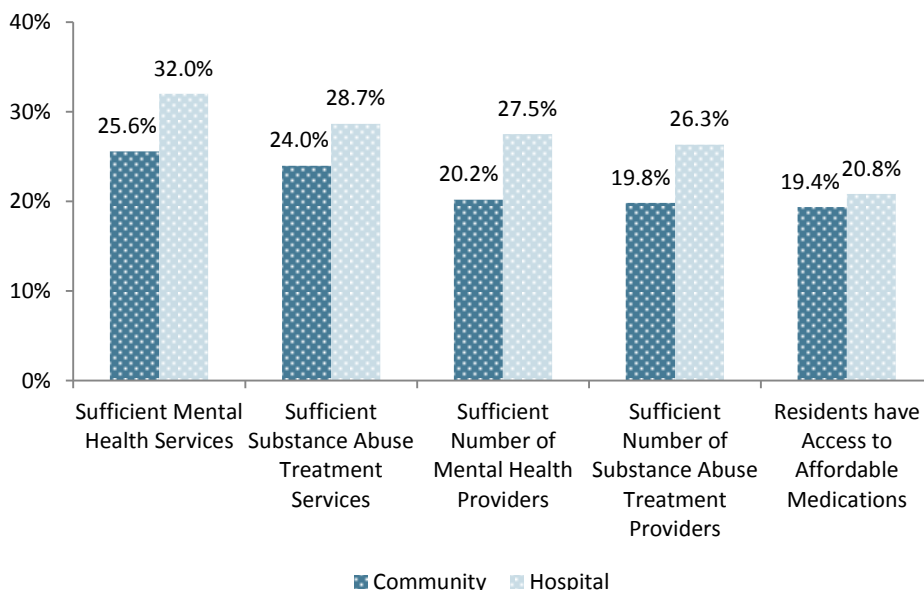


Figure 32- Key Informant Survey, Access to Health Care Services, “Strongly Disagree”



The key informant survey asked respondents a question about the degree to which resources or services are available in their communities using a Likert scale of 1 - 5 with 1 = never available; 3 = sometimes available; and 5 = always available. A response option of “do not know” was provided. As the majority of the responses were in the “sometimes available” range, weighted averages are presented for all response options by community and hospital (**Table 36**).

Table 36 - Key Informant Survey, Availability of Resources or Services, Range of “Sometimes Available”

Community Respondents		Hospital Respondents	
Response Options	Weighted Average	Response Options	Weighted Average
Bilingual services	3.98	Bilingual services	3.99
Physical Health Screenings	3.73	Free / Low Cost Dental Care	3.69
Substance Use / Misuse Screenings	3.73	Physical Health Screenings	3.69
Free / Low Cost Substance Abuse/Misuse Care	3.71	Substance Use / Misuse Screenings	3.58
Health Education / Information / Outreach	3.66	Health Education / Information / Outreach	3.51
Mental Health Screenings	3.56	Free / Low Cost Medical Care	3.44
Free / Low Cost Dental Care	3.53	Prescription Affordability / Assistance	3.44
Free / Low Cost Medical Care	3.51	Mental Health Screenings	3.41
Free / Low Cost Mental Health Care	3.44	Transportation to / from Health Services	3.37
Prescription Affordability / Assistance	3.42	Free / Low Cost Substance Abuse/Misuse Care	3.3
Transportation to / from Health Services	3.39	Free / Low Cost Mental Health Care	3.13

Regarding barriers to care, the key informant survey respondents were asked to rate the degree to which specific populations in the community experience barriers to receiving health and well-being services using a Likert scale of 1 - 5 with 1 = no barriers to receiving health and well-being services; 3 = moderate barriers to receiving health and well-being services; and 5 = significant barriers to receiving health and well-being services. 14 response options were given and “other” with the ability to input a response was provided. **Figures 33** and **34** give the top five populations for “significant barriers to receiving health and well-being services” for the community and hospital, respectively.

Figure 33 - Key Informant Survey, Top 5 populations for “Significant Barriers to Receiving Health and Well-being Services”, Community Responses

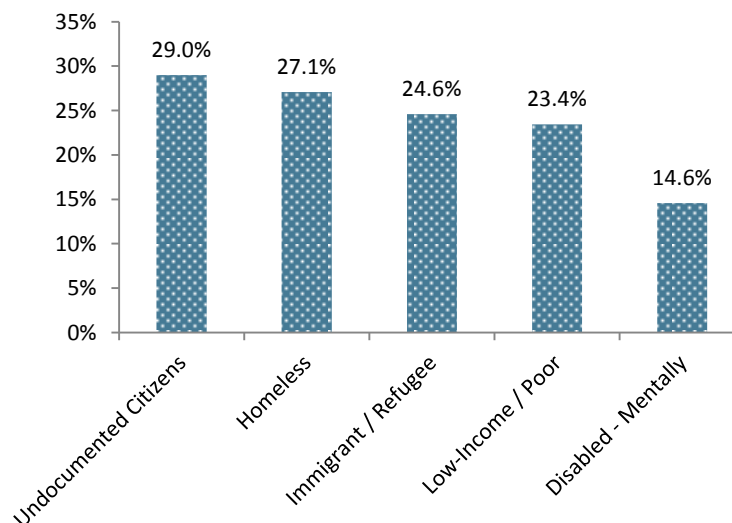
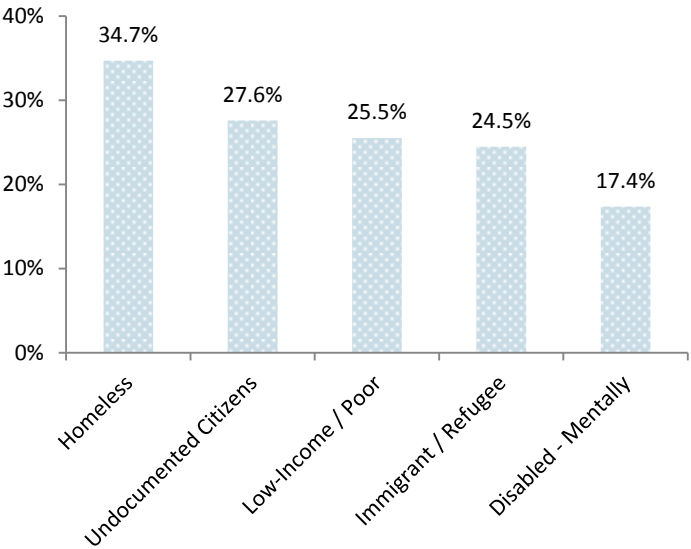
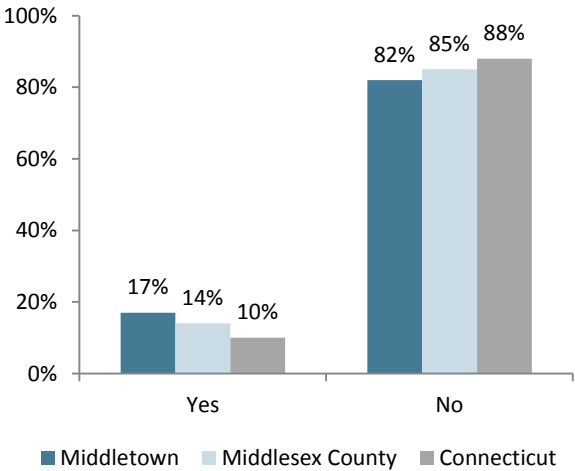


Figure 34 - Key Informant Survey, Top 5 populations for “Significant barriers to receiving health and well-being services”, Hospital Responses



The 2018 DataHaven Community Wellbeing Survey asked respondents questions about their treatment by other people or their belief about how other people have treated them. With regard to experience within the healthcare system, respondents were asked “*when seeking health care, have you ever been treated with less respect or received services that were not as good as what other people get?*”. A greater percentage of people in Middletown (17%) and Middlesex County (14%) responded “yes” when compared to Connecticut (10%), **Figure 35**.

Figure 35 – “Have You Been Treated with Less Respect/Received Poorer Services in the Healthcare System?”



Source: DataHaven Community Wellbeing Survey, 2018

SDOH IMPACT ON COMMUNITY HEALTH AND WELL-BEING

For the social determinants of health section of the key informant survey, respondents were asked to rate the degree to which they believed 24 different determinants of health options impact the health and well-being status of the community using a Likert scale of 1 - 5, with 1 = limited impact on community health and well-being, 3 = moderate impact on community health and well-being and 5 = significant impact on community health and well-being. A response option of “do not know” was provided. Respondents were also given the option to check “other” and add free text. Response categories were generated from a selection of sub-categories of the Healthy People 2020 place-based organizational framework for five key areas of social determinants of health (economic stability; education; social and community context; health and health care; and, neighborhood and built environment), and expanded for the 2019 CHNA. **Figures 36a and 36b** give the percentage of “significant impact on community health and well-being” responses for the top 5 response options, by community and hospital.

Figure 36a - Key Informant Survey, % of Responses for “Significant Impact on Community Health and Well-being”, Community

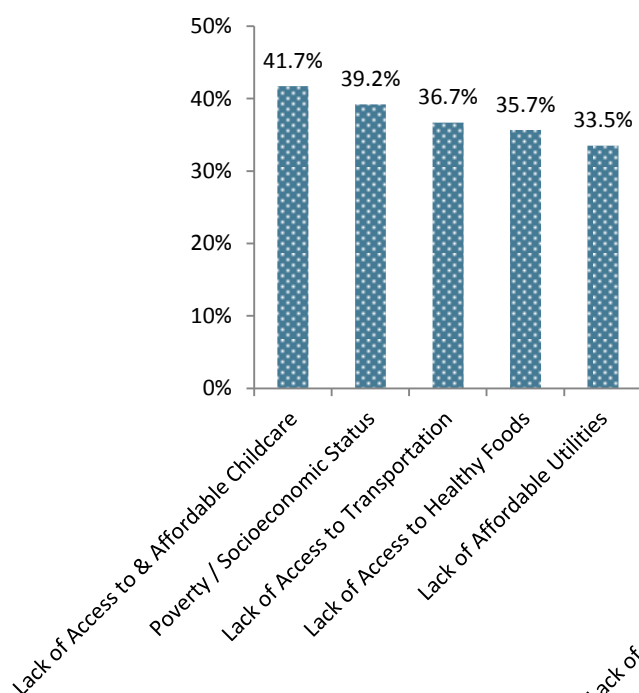
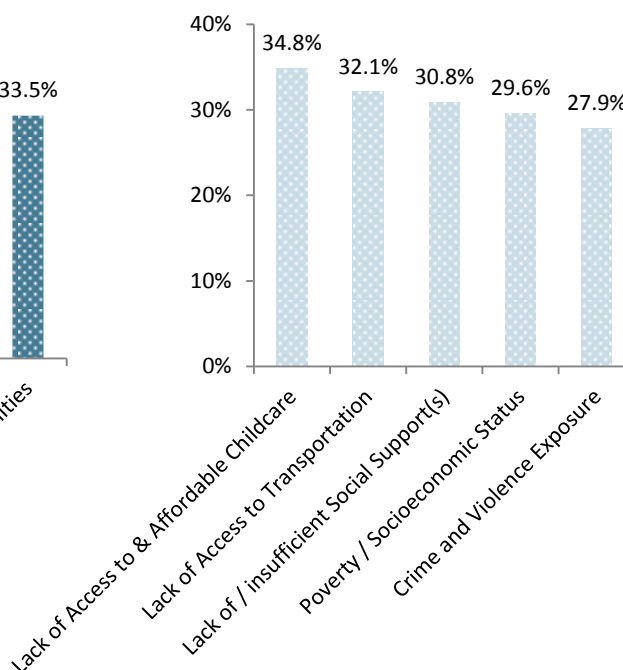


Figure 36b - Key Informant Survey, % of Responses for “Significant Impact on Community Health and Well-being”, Hospital



The following definitions were provided: access to educational opportunities was defined as “higher education, adult education, trade education”; food insecurity was defined as “physical, social, or economic access to food”; health literacy was defined as “the capacity to obtain, process, and understand basic health information/services needed to make appropriate health decisions”; institutional racism was defined as “societal patterns and structures that impose oppressive or otherwise negative conditions on the basis of race or ethnicity”; and social support was defined as “assistance available from a supportive social network, emotional support from family and friends, etc.”.

Tables 37a and 37b outline the percentage of “significant impact on community health and well-being” responses for all the response options, by community and hospital.

Table 37a - Key Informant Survey, “Significant Impact on Community Health and Well-being” % of Responses, Community

40%+	39% - 35%	34% - 30%	29% - 25%	24% - 20%	19% - 15%
Lack of Access to Childcare / Affordable Childcare (41.7%)	Poverty / Socioeconomic Status (39.2%)	Lack of Affordable Utilities (33.5%)	Food Insecurity (29.3%)	Lack of Access to Educational Opportunities (24.1%)	Low or Limited Literacy (19.3%)
	Lack of Access to Transportation (36.7%)	Health Literacy (31.7%)	Unemployment (28.6%)	Discrimination (21.6%)	Community Activism for Health and Health Related Issues (18.6%)
	Lack of Access to Healthy Foods (35.7%)	Lack of / Insufficient Social Support(s) (31.67%)	Underemployment (28.3%)		Incarceration or Imprisonment (18.5%)
			Housing Instability (28.3%)		Lack of Access to Recreational and Green Spaces (15.2%)
			Institutional Racism (27.9%)		
			Lack of Access to Public Assistance / Basic Needs (27.6%)		
			Crime and Violence Exposure (26.8%)		
			Homelessness (26.6%)		
			Lack of Access to Job Opportunities (26.4%)		
			Lack of Access to Early Childhood Education (26.3%)		
			Poor Housing Quality (25.3%)		

Table 37b - Key Informant Survey, “Significant Impact on Community Health and Well-being” % of Responses, Hospital

35% - 30%	29% - 25%	24% - 20%	19% - 15%	14% - 10%
Lack of Access to Childcare / Affordable Childcare (34.8%)	Poverty / Socioeconomic Status (29.6%)	Unemployment (24.1%)	Discrimination (19.0%)	Lack of Access to Recreational and Green Spaces (10.7%)
Lack of Access to Transportation (32.1%)	Crime and Violence Exposure (27.9%)	Underemployment (23.6%)	Low or Limited Literacy (18.9%)	
Lack of / Insufficient Social Support(s) (30.8%)	Health Literacy (27.7%)	Poor Housing Quality (22.0%)	Lack of Access to Early Childhood Education (18.2%)	
	Homelessness (27.7%)	Lack of Access to Job Opportunities (21.9%)	Incarceration or Imprisonment (17.8%)	
	Lack of Access to Healthy Foods (26.9%)	Institutional Racism (20.1%)	Community Activism for Health and Health Related Issues (15.8%)	
	Lack of Affordable Utilities (26.8%)			
	Lack of Access to Public Assistance / Basic Needs (26.8%)			
	Housing Instability (25.6%)			
	Food Insecurity (25.5%)			
	Lack of Access to Educational Opportunities (25.2%)			

2-1-1 CT SERVICE REQUESTS

2-1-1 is a program under the United Way of Connecticut and is supported by the State of Connecticut and Connecticut United Ways. By dialing 2-1-1 or conducting an online database search on <https://www.211ct.org/>, people are connected with needed local resources and services. **Table 38** describes the Connecticut 2-1-1 service requests for Middletown, Middlesex County and Connecticut for the January 1, 2018 to December 31, 2018 time-period. Need requests from Middletown comprise the majority of requests made in Middlesex County (**Table 39**).

Table 38 - 2-1-1 Service Requests by Overall Categories, 2018

Category	Middletown	Middlesex County	Connecticut
Mental Health & Addictions	33.1%	30.4%	22.1%
Housing & Shelter	26.6%	24.0%	29.7%
Employment & Income	10.8%	10.9%	9.4%
Utilities	5.7%	7.3%	9.0%
Healthcare	5.3%	7.6%	8.4%
Government & Legal	3.0%	3.7%	3.9%
Food	2.6%	3.0%	4.0%
Disaster	1.5%	1.6%	1.5%
Transportation Assistance	1.1%	1.1%	1.0%
Clothing & Household	<1%	<1%	1.2%
Education	<1%	<1%	<1%
Child Care & Parenting	<1%	<1%	<1%
Other	9.1%	9.2%	9.0%

Source: 2-1-1 Counts, Connecticut 2-1-1; <http://ct.211counts.org/>

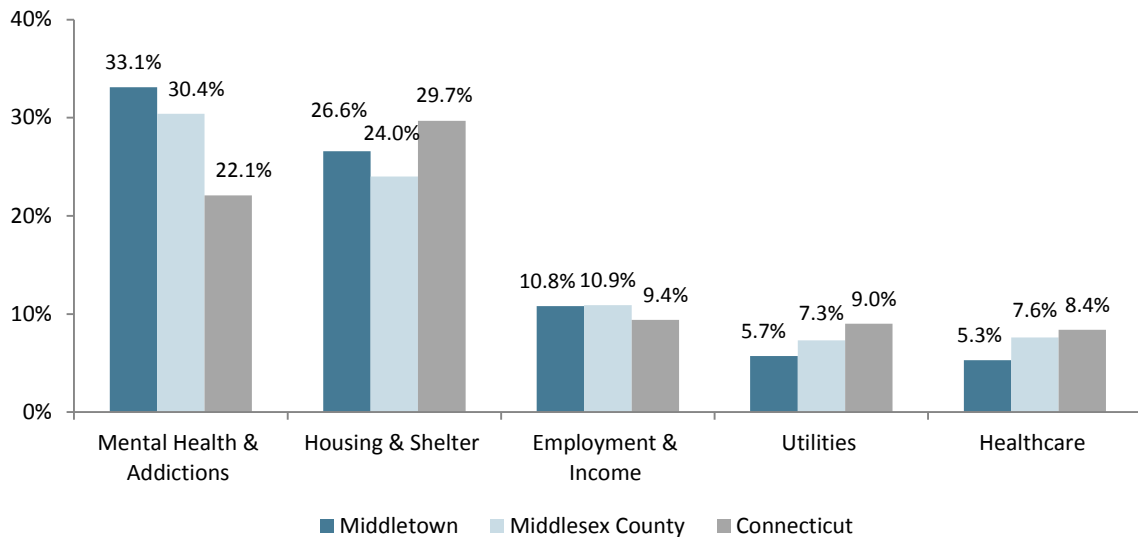
Table 39 - % of 2-1-1 Service Requests from Middletown, 2018

Category	Middletown	Middlesex County	% from Middletown
Total Count	8,125	12,136	66.9%
Mental Health & Addictions	2,689	3,687	72.9%
Housing & Shelter	2,163	2,914	74.2%
Employment & Income	877	1,321	66.4%
Utilities	460	888	51.8%
Healthcare	433	917	47.2%
Government & Legal	241	455	53.0%
Food	213	370	57.6%
Disaster	119	195	61.0%
Transportation Assistance	92	138	66.7%
Clothing & Household	62	86	72.1%
Education	18	25	72.0%
Child Care & Parenting	17	29	58.6%
Other	741	1,111	66.7%

Source: 2-1-1 Counts, Connecticut 2-1-1; <http://ct.211counts.org/>

Figure 37 reviews the top five service 2-1-1 requests made for Middletown, Middlesex County and Connecticut.

Figure 37 - Top Five 2-1-1 Service Requests by Overall Categories, 2018



Source: 2-1-1 Counts, Connecticut 2-1-1; <http://ct.211counts.org/>

The Middletown and Middlesex County ranking for the top three 2-1-1 service requests in Middlesex Health’s last CHNA was 1) Housing & Shelter; 2) Employment & Income; and 3) Mental Health & Addictions (2-1-1 CT, 2015). For this CHNA, the Middletown and Middlesex County ranking has shifted to 1) Mental Health & Addictions; 2) Housing & Shelter; 3) Employment & Income (2-1-1 CT, 2018).

Since Middlesex Health’s last CHNA, the 2-1-1 requests for Mental Health & Addictions assistance increased substantially from 15.0% to 33.1% for Middletown and 18.0% to 30.4% for Middlesex County (2-1-1 CT, 2015 & 2018). In addition, the 2-1-1 2018 Mental Health & Addictions service call volume percentages for Middletown and Middlesex County are significantly higher than Connecticut (22.1%), indicating an increased need for behavioral health services in Middletown and Middlesex County.

The Housing & Shelter requests slightly changed between CHNA cycles, decreasing from 27.5% to 26.6% in Middletown and increasing from 21.1% to 24.0% in Middlesex County (2-1-1 CT, 2015 & 2018). In Connecticut, those individuals and families experiencing homelessness or at imminent risk of becoming homeless must access emergency housing services through 2-1-1 which connects to the regional Coordinated Access Network (CAN), a system to assess and assign housing assistance and supports to those in the midst of a housing crisis. The majority of the Housing & Shelter calls are for shelters (emergency housing), with the shelter requests decreasing from 78.8% to 63.9% in Middletown and 73.7% to 56.8% in Middlesex County between CHNA cycles (2-1-1 CT, 2015 & 2018).

Employment & Income requests dropped significantly between CHNA cycles from 23.4% to 10.8% in Middletown and 22.6% to 10.9% in Middlesex County (2-1-1 CT, 2015 & 2018).

2-1-1 also tracks unmet needs. Of interest are the unmet need results for Rent Assistance requests, defined as “financial assistance for rent, mobile home lot fees, motel, rental deposits, homeless motel vouchers and other home-related payments and assistance”. For 2019, for Middletown, 8.4% of the calls placed to 2-1-1 for housing were for rental assistance, and of that total 56% were unmet. For Middlesex County, 9.1% of the calls placed to 2-1-1 for housing were for rental assistance, and of that total 69% were unmet (2-1-1 CT, 2018).

Tables 40a and **40b** give the overall categories and sub-category detail of the top seven 2-1-1 request types for Middletown, Middlesex County and Connecticut for the January 1, 2018 to December 31, 2018 time-period

Table 40a - Top Seven 2-1-1 Service Requests Detail, 2018

	Middletown		Middlesex County		Connecticut	
	%	Count	%	Count	%	Count
Total Requests	100%	8,125	100%	12,136	100%	315,895
Mental Health & Addictions	33.1%	2,689	30.4%	3,687	22.1%	69,854
Substance abuse & addictions	6.9%	186	7.6%	280	8.7%	6,087
Marriage & family	0.0%	0	0.0%	0	0.0%	0
Crisis intervention & suicide	17.7%	477	30.3%	1,116	42.3%	29,564
Mental health services	74.8%	2,011	61.6%	2,270	48.4%	33,781
Mental health facilities	<1%	15	<1%	21	<1%	422
Other mental health & addictions	0.0%	0	0.0%	0	0.0%	0
Housing & Shelter	26.6%	2,163	24.0%	2,914	29.7%	93,966
Shelters	63.9%	1,383	56.8%	1,656	54.4%	51,135
Low-cost housing	9.6%	208	11.8%	345	11.4%	10,666
Home repair / maintenance	<1%	11	1.3%	38	1.1%	1,042
Rent assistance	8.4%	181	9.1%	266	12.4%	11,647
Mortgage assistance	<1%	19	1.9%	54	1.1%	1,047
Landlord / tenant issues	3.3%	71	3.4%	100	4.1%	3,835
Contacts	13.4%	290	15.6%	455	15.5%	14,558
Other housing & shelter	0.0%	0	0.0%	0	<1%	36
Employment & Income	10.8%	877	10.9%	1,321	9.4%	29,796
Job search	15.2%	133	12.4%	164	9.0%	2,686
Job development	<1%	6	<1%	6	<1%	56
Unemployment benefits	<1%	5	1.1%	14	1.3%	398
Tax preparation	51.1%	448	41.7%	551	18.8%	5,608
Financial assistance	28.3%	248	38.9%	514	61.7%	18,478
Money management	<1%	8	1.2%	16	1.1%	340
Contacts	3.3%	29	4.2%	56	7.9%	2,361
Other employment & income	0.0%	0	0.0%	0	0.0%	0

Source: 2-1-1 Counts, Connecticut 2-1-1; <http://ct.211counts.org/>

Table 40b - Top Seven 2-1-1 Service Requests Detail, 2018 (continued)

	Middletown		Middlesex County		Connecticut	
	%	Count	%	Count	%	Count
Utilities	5.7%	460	7.3%	888	9.0%	28,497
Electric	57.6%	265	57.9%	514	55.9%	15,984
Gas	14.8%	68	10.5%	93	20.1%	5,722
Water	<1%	3	<1%	4	1.0%	298
Heating fuel	12.2%	56	18.2%	162	11.3%	3,220
Trash collection	0.0%	0	0.0%	0	0.0%	0
Utility payment plans	0.0%	0	0.0%	0	<1%	66
Utility deposit assistance	0.0%	0	0.0%	0	0.0%	0
Disconnection protection	8.9%	41	7.4%	66	6.5%	1,845
Phone	4.3%	20	4.1%	36	3.2%	918
Contacts	1.5%	7	1.5%	13	1.8%	524
Other utilities	0.0%	0	0.0%	0	<1%	1
Healthcare	5.3%	433	7.6%	917	8.4%	26,682
Health insurance	51.7%	224	57.1%	524	56.7%	15,310
Medical expense assistance	<1%	2	<1%	5	<1%	149
Medical providers	19.9%	86	17.9%	164	17.1%	4,620
Dental care	6.0%	26	5.3%	49	3.2%	860
Eye care	0.0%	0	<1%	2	<1%	82
Prescription medications	<1%	3	<1%	7	<1%	186
Medical equipment	1.2%	5	<1%	8	1.1%	305
Nursing homes & adult care	10.2%	44	8.9%	82	9.0%	2,421
Reproductive health	<1%	2	<1%	3	<1%	72
Death related	<1%	2	<1%	6	<1%	189
Contacts	4.6%	20	4.5%	41	7.9%	2,131
Other health services	4.4%	19	2.8%	26	2.5%	664
Other healthcare	0.0%	0	0.0%	0	0.0%	0
Government & Legal	3.0%	241	3.7%	455	3.9%	12,330
Legal assistance	41.10%	99	38.9%	177	37.4%	4,703
Child & family law	11.60%	28	16.5%	75	13.4%	1,688
Immigration assistance	0%	0	<1%	1	1.3%	168
Government	7.50%	18	7.9%	36	12.6%	1,585
Contacts	39.80%	96	36.5%	166	35.3%	4,436
Other government & legal	0%	0	0.0%	0	<1%	1
Food	2.6%	213	3.0%	370	4.0%	12,537
Help buying food	40.4%	86	50.0%	185	40.4%	5,117
Food pantries	34.7%	74	30.8%	114	34.5%	4,340
Soup kitchens	14.1%	30	11.1%	41	16.2%	2,036
Feeding children	0.0%	0	<1%	1	1.4%	181
Home-delivered meals	7.0%	15	5.7%	21	3.1%	396
Holiday meals	3.8%	8	2.2%	8	4.3%	534
Contacts	0.0%	0	0.0%	0	0.0%	0
Other food	0.0%	0	0.0%	0	<1%	15

Source: 2-1-1 Counts, Connecticut 2-1-1; <http://ct.211counts.org/>

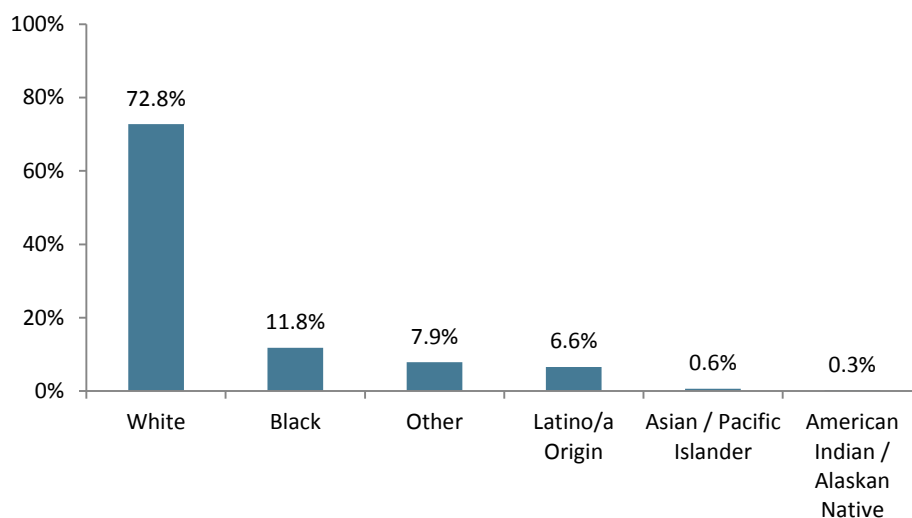
CMS ACCOUNTABLE HEALTH COMMUNITIES INITIATIVE

Middlesex Health is participating in the Centers for Medicare & Medicaid Services (CMS) Accountable Health Communities (AHC) five year pilot project through the Connecticut Coalition to Align Systems and Connect People with Services (CT CAPS), a six hospital partnership with Danbury Hospital (Nuvance Health) serving as the bridge organization. The purpose of the AHC model is to test whether systematically identifying and addressing the health-related social needs of community-dwelling Medicare and Medicaid beneficiaries through screening, referral and community navigation services will impact health care quality, utilization and costs. The model design bridges the gap between clinical and community service providers (CMS, 2016).

At Middlesex Health, screens are conducted in the Middletown emergency department (ED). Eligible patients are screened for five core health-related social needs (housing instability; utility needs; food insecurity; interpersonal violence; transportation), as well as an added supplemental screen for substance abuse. High-risk beneficiaries (2+ ED visits in the past 12 months screening positive for health-related social needs) are referred to navigators who assist patients with accessing community based services in order to address the needs identified during the screening process.

Between the time period of August 2018 – August 2019, 3,413 screens were conducted in the Middletown ED (2,959 of which were unique individuals). Of the unique individuals, 40% were male and 60% were female, and **Figure 38** outlines the racial/ethnic make-up of the sample.

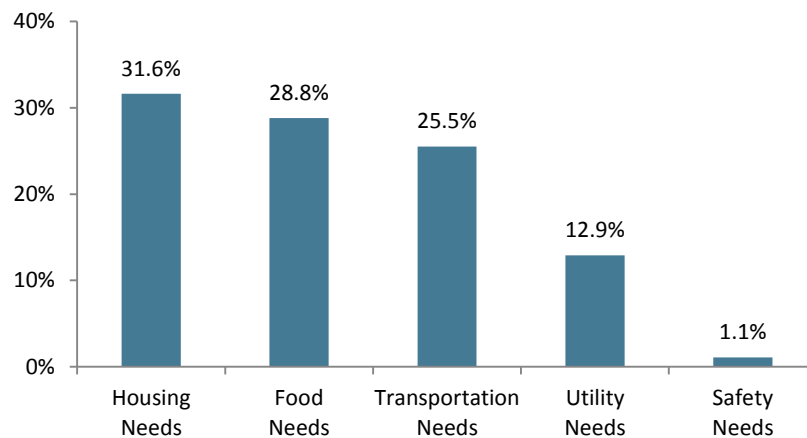
**Figure 38 - CMS Accountable Health Communities,
Race & Ethnicity**



Source: CMS Accountable Health Communities, 2019
Middlesex Health Middletown Emergency Department Screens, Aug 2018 – Aug 2019
Demographics by unique patients

Of the total 3,413 screens that were conducted in the Middletown ED during August 2018 – August 2019, core health-related social needs were identified 10.7% (364) of the time for high-risk and non-high risk patients combined. Of the unique individuals who visited the ED during this time frame, 54% had two or more ED visits in the past 12 months and were identified as high-risk. **Figure 39** presents the frequency of the five core health-related social needs identified during the first year of the project (excluding substance abuse responses).

Figure 39 - CMS Accountable Health Communities, Health-Related Social Needs



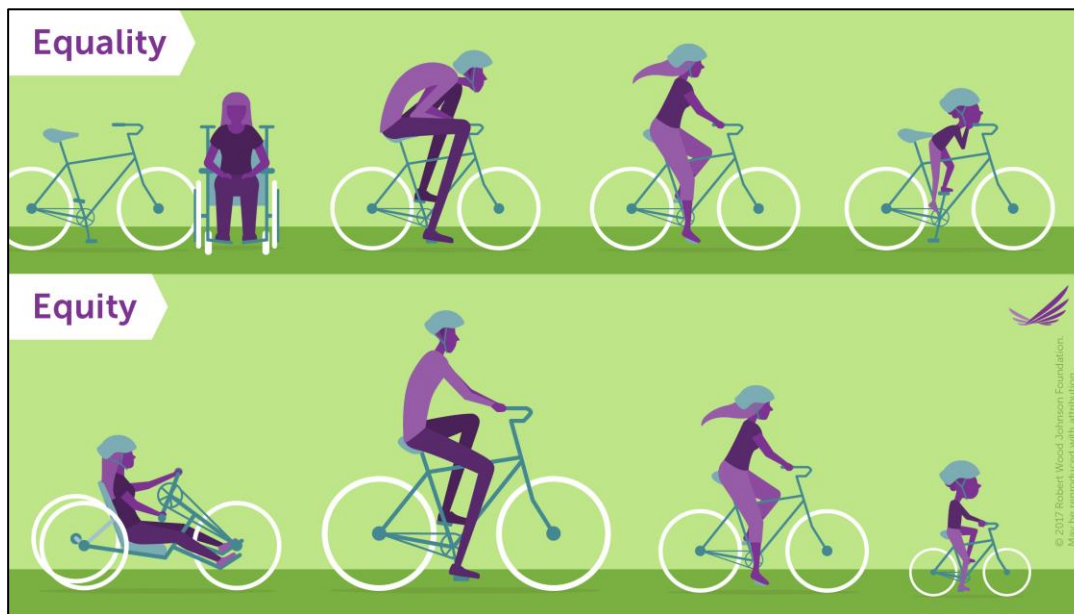
Source: CMS Accountable Health Communities, 2019
Middlesex Health Middletown Emergency Department Screens, Aug 2018 – Aug 2019
Values based on total screens conducted

HEALTH EQUITY

Health Equity is defined as the state in which everyone has the opportunity to attain full health potential and no one is disadvantaged from achieving this potential because of social position or any other socially defined circumstance (NASEM, 2017). Longstanding and pervasive health inequities exist in the United States and have resulted in an unjust system where specific groups of people have systematically experienced greater obstacles to health and poorer health outcomes based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion (HHS, 2008; Healthy People 2020).

When visualizing health equity (**Figure 40**), it extends beyond equality (i.e. where everyone has the same size bike), to the concept of ensuring that people have what they need to thrive and be successful (i.e. having the size/type of bike that meets individual needs). It is the understanding that those with the greatest needs and least resources require more, not equal, effort and resources to equalize opportunities.

Figure 40 - Meeting Needs with Equity



Source: RWJF, <https://www.rwjf.org/en/library/infographics/visualizing-health-equity.html#/download>

Advancing health equity in order to make certain that every citizen has a fair and just opportunity to be as healthy as possible requires meaningful examination of the unequal and inequitable systems and drivers - within the current and historic context - that perpetuate health disparities, such as poverty; discrimination; structural/institutional racism and its consequences; powerlessness; and, lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

Addressing health inequities must start with an understanding that health disparities and their adverse consequences are not only a widespread public health issue, but are a violation of ethical and human rights principles. As the mechanisms for health inequities are complex, varied and firmly established, an intentional and committed approach is necessary to begin and sustain the work of advancing health equity. There are many tools and resources available to translate knowledge into action, but the endeavor starts with a desire to produce change. NASEM's *Communities in Action: Pathways to Health Equity* and RWFJ's *What Is Health Equity? And What Difference Does a Definition Make?* provide insight and guidance on the steps needed for this effort:

Step 1: The first step starts with a common fundamental understanding and consensus regarding the importance of health equity and the root causes of health disparities and inequity.

- **Health equity is crucial for the well-being and vibrancy of communities and is a moral imperative.** A high price for health inequity is paid in the United States in lost lives, potential and resources, and, broadly speaking, it is antithetical to the system of equality that the U.S. purports to have.
- **Health is a product of multiple determinants.** Many disparities in health are rooted in inequities in the opportunities and resources needed to be as healthy as possible. The unequal distribution of power and resources causes unequal social, economic, and environmental conditions. These structural factors (i.e. social determinants of health) often matter more than health care in shaping health disparities.
- **Structural inequities contribute to, cause and shape health inequities.** Structural inequities are the personal, interpersonal, institutional, and systemic drivers (such as, racism, sexism, classism, able-ism, xenophobia, and homophobia) that organize the allocation of power and resources differentially among social groups. They cause systematic and deeply embedded disadvantages to certain groups when compared to other groups with whom they coexist, and cause unfair and avoidable differences in health outcomes.

Step 2: Identify salient health disparities and social inequities, including at system levels.

Step 3: Take action to address identified health disparities and social inequities.

- Community partnerships and evidence-informed community-based initiatives are an important component for promoting health equity. Vital to the design, implementation, evaluation and sustainability of promising solutions is actively engaging the members from excluded or marginalized groups who are most affected by disparities (i.e. community-driven).
- Guiding principles for community-based efforts to advance health equity require: 1) making health equity a shared vision and value; 2) increasing community capacity to shape outcomes, and: 3) fostering diverse, multi-sector collaboration (Community Tool Box, 2016). **Table 41** outlines additional characteristics for successful community-based practices.

Table 41 - Successful Community-Based Practice Characteristics

1)	Leveraging existing efforts whenever possible.
2)	Adopting explicit strategies for authentic community engagement, ownership, involvement, and input throughout all stages of the selected effort/initiative.
3)	Nurturing the next generation of leadership.
4)	Fostering flexibility, creativity, and resilience where possible.
5)	Engaging community partners, including nontraditional ones.
6)	Committing to results, systematic learning, cross-boundary collaboration, capacity building, and sustainability.
7)	Partnering with public health agencies whenever possible, no matter the focus of the effort.

Source: Community Tool Box, 2016; FSG, 2011, 2013; Prybil et al., 2014; Verbitsky-Savitz et al., 2016

Step 4: Change and implement policies, laws, systems, environments, and practices to reduce inequities.

- While community partnerships and community-based solutions are necessary for advancing health equity, they are not sufficient and cannot be the sole strategy. In order to eliminate unfair and preventable differences in health outcomes, the unfair social conditions that give rise to them must be eliminated.
- Communities exist in an environment of national, state, and local level policies, forces, and programs that interfere with or impede the ability of community members/partnerships to address the conditions that lead to health inequities. Given this, purposeful changes to policies, laws, systems, and institutional practices that create and perpetuate inequities at all levels (community, county, state and national) are necessary to address both structural and health inequities. **Table 42** gives examples of systems-level discriminatory policies and practices.

Table 42 - Social Ecological Model, Systems Level Discriminatory Examples

▪	Systemic Level - Immigration policies; Incarceration policies; Predatory banking.
▪	Community Level - Differential resource allocation; Racially or class segregated schools; Residential segregation.
▪	Institutional Level - Hiring and promotion practices; Under- or over-valuation of contributions.
▪	Interpersonal Level - Overt discrimination; Implicit bias.
▪	Intrapersonal Level - Internalized “isms”; Stereotype threat; Embodying inequities.

Source: National Academies of Sciences, Engineering, and Medicine 2017. *Communities in Action: Pathways to Health Equity*. Washington, DC: The National Academies Press

Original Data Source: Concept from McLeroy et al., 1988

Interpersonal = relating to relationships or communication between people
 Intrapersonal = existing or occurring within the self or within one's mind

Step 5: Evaluate and monitor efforts using short- and long-term measures.

- As it may take decades or generations to address the systemic root causes of health inequities, reduce health disparities and realize measurable gains, it is important to identify short- and intermediate-term outcome indicators that can be improved within the given timeframe for a specific initiative in order to begin to narrow health disparity gaps. Selected indicators and measures should be evaluated and monitored on an on-going basis.

Step 6: Reassess strategies to plan next steps.

- Achieving health equity is not a finite project, it requires a constant, systematic, and devoted effort. Regular reassessments of strategies and initiatives as part of an ongoing cycle of improvement are necessary in order to continue forward movement.

Sources for Steps 1 – 6:

- 1) National Academies of Sciences, Engineering, and Medicine 2017. *Communities in Action: Pathways to Health Equity*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/24624>
- 2) Braveman P, Arkin E, Orleans T, Proctor D, and Plough A. *What Is Health Equity? And What Difference Does a Definition Make?* Princeton, NJ: Robert Wood Johnson Foundation, 2017

Hospitals and health care systems, as anchor institutions, can play a vital role in promoting health equity and ensuring that all people have equitable opportunity to achieve optimal health. In addition to making health equity an organizational goal and sustained commitment, it is important for health care institutions to adopt an upstream model of health (addressing the socio-ecological conditions contributing to health outcomes) and to partner with local and state-wide community based organizations, advocacy groups and initiatives that focus on advancing health equity and institutional change. **Table 43** outlines useful strategies for community-based health equity initiatives.

Table 43 - Core Strategies for Successful Community-Based Health Equity Initiatives

<ol style="list-style-type: none">1) Build community voice and leadership capacity in order to build power.2) Explicitly analyze and address various forms of structural oppression.3) Shift the cultural narrative from one of exclusion to one of inclusion.4) Build relationships, leadership structures, and trust to advance goals; prepare for the opportune moment to shift policy and systems in support of equity.5) Align community systems, assets, and skills into a new, coherent force for change.6) Leverage policy and system changes to realign funding and resources to support community-driven equity goals.7) Lead with humility and acknowledge that everyone has contributions.
--

Source: Trust for America's Health; *Advancing Health Equity: What We Have Learned from Community-Based Health Equity Initiatives*, Convening Summary, March 1, 2018, <https://www.tfah.org/>

Examples of strong and meaningful local health equity work include:

The Middlesex County Branch NAACP Health Committee: the Middlesex County Branch NAACP Health Committee (“the NAACP Health Committee”) was formed to address *Health Equality for all Americans*, one of the six NAACP National Game Changers for the 21st Century. The NAACP’s national health focus is on healthy lives; equal access to affordable, high-quality health care; and, an end to racially disparate health outcomes. To align with the national objectives, the NAACP Health Committee developed a mission to promote, protect and maintain the health and well-being of Black/African Americans, Latino/as and all people of color in Middlesex County by assessing health needs and advocating for health equity in order to achieve positive health outcomes. To accomplish its mission and meet its vision – a nation where all people are free from the racial and ethnic inequities that undermine optimal health and quality of life – the NAACP Health Committee is governed by a set of guiding principles: 1) to better understand how various systems contribute to health inequity; 2) to better understand the lived experiences of people of color within the systems that contribute to their health outcomes; 3) to address disparities in health outcomes and social determinants of health for people of color in the local community; and 4) to address systemic and institutional racism in the context of health outcomes.

In 2018, the NAACP Health Committee secured funding from the Connecticut Health Foundation, the Community Foundation of Middlesex County, and the Middlesex Health Women’s Wellness Fund in order to embark on a focus group study to gain an authentic understanding of how the quantitative disparity data from Middlesex Hospital’s 2016 community health needs assessment translates into real life experiences for the people who are most impacted by the inequities. The NAACP Health Committee commissioned Health Equity Solutions (Hartford, CT) to conduct the focus groups, perform data analysis and prepare a report of the findings. The project results will allow the NAACP Health Committee to 1) work with partners and those engaged throughout the process to develop goals and strategies that are guided by and in alignment with the needs and preferences of the Black/African American and Latino/a communities in Middlesex County, and 2) to ultimately effectively change systems in order to advance health equity. Middlesex Health will incorporate the results of the NAACP Health Committee’s focus group study into its 2019 CHNA implementation strategy prioritization planning and will continue to partner with the NAACP Health Committee throughout the future phases of their health equity strategy.

The Ministerial Health Fellowship: the Ministerial Health Fellowship (MHF) is a program under the Cross Street Training & Academic Center, Inc. (CSTAC), an established grassroots coalition that is well known in the community for education, advocacy and health care initiatives. MHF was formed in 2015 as a faith-based health care advocacy network of Black pastors and church leaders from the Middletown, New Britain, and Hartford areas with the purpose of building knowledge of health care issues, advocating for health equity, and forging connections with health care providers and public officials in order to reduce health disparities for communities of color. Over the past few years, MHF has 1) conducted health community conversations to provide a forum for community input regarding important health and health-related issues; 2) effectively highlighted key health equity issues to legislators, and 3) substantially contributed to the passing of the Community Health Worker bill in Connecticut. MHF does its coalition

work by convening monthly meetings and organizing public events, health fairs and an annual Legislative Breakfast to strengthen and support advocacy. Upcoming plans include promoting health insurance affordability, health care access for communities of color, and piloting a Community Health Worker program in Ministerial Health Fellowship churches in partnership with Middlesex Health.

On December 12, 2016, The State Innovation Model Consumer Advisory Board (SIM CAB), in partnership with the North Central Regional Mental Health Board (NCRMHB) and Ministerial Health Fellowship church leaders organized a health equity listening session at the Cross Street AME Zion Church in Middletown, CT. The purpose of the event was to engage Black community members in sharing their experiences with health care access, and to rally the community in a call-to-action to address health care issues collaboratively (CT SIM CAB, 2016). Attendees included pastors, church leaders and community members who identified with the Black faith community. Facilitated discussions through eight dialogue groups included the topics of health care access specific to the Black community, cultural health concerns, and ideas to address these issues. Key takeaways from the listening session are outlined in **Table 44**.

Table 44 - Key Findings from SIM CAB, NCRMHB & MHF Health Equity Listening Session, Dec. 2016

Table 44 - Key Findings from SIM CAB, NCRMHB & MHF Health Equity Listening Session, Dec. 2016
<ul style="list-style-type: none"> ▪ <i>Black pastors and church leaders play a highly influential role in the lives of their congregations, are often the first to hear about health and behavioral health issues, and help their congregants navigate the system and connect to care.</i> ▪ <i>As pastors and church leaders have a deep knowledge of their communities' needs, they can serve as advocates and policy influencers to help create systemic change.</i> ▪ <i>Church leaders felt it was important to offer education to people regarding their health care, and felt they, as trusted leaders, needed more education about health care and diagnoses in order to better help their church members.</i> ▪ <i>African American faith communities agreed on the importance of the Affordable Care Act (ACA).</i> ▪ <i>The Black community struggled to connect with Access Health CT and face-to-face advocacy and education in their communities is preferable to the on-line resources.</i> ▪ <i>Diabetes affects many Black community members.</i> ▪ <i>Funding to support Black faith-based community-based initiatives is necessary.</i> ▪ <i>There was widespread concern about disproportionate incarceration of Black men due to mental health and addiction issues. Referral to treatment, linkage to supportive services, and police education were suggested as important steps in reducing this disparity.</i> ▪ <i>Continuing the work of the Ministerial Health Fellowship is necessary to strengthen the network of Black pastors and church leaders and the legislative advocacy coalition to ensure that Black communities get improved health care access.</i>

Source: CT State Innovation Model Consumer Advisory Board (CAB) Black Faith Community Listening Session Report, Cross Street AME Zion Church, Middletown, CT, December 12, 2016. Prepared by Marcia Dufore and Quyen Truong, North Central Regional Mental Health Board, and Robyn Anderson, Ministerial Health Fellowship

PARTNERSHIPS

The NAACP has an accomplished and extensive history of grassroots activism and civic engagement. With their focus on health equity advocacy, local NAACPs are important partners in advancing community-driven health priorities and informing community-driven policies needed to improve health equity for people of color, where extensive disparities continue to exist.

Faith-based organizations have a legacy of providing safety net services in many communities and are powerful vehicles for social, economic and political change (Bronheim, 2001). As exemplified by the results of the SIM CAB/NCRMHB/MHF December 2016 listening session, many people of color have trusted relationships with their faith leaders and pastors. Faith-based health ministries have vast experience in community-based work, first-hand knowledge of local community member needs, have been focusing on health care issues in their communities for many years, and are able to deliver impactful and personalized assistance within an environment of trust (Bronheim, 2001).

Given the foundations of advocacy, trust and a proven history of effective and successful community-based work, local organizations like the Middlesex County Branch NAACP and the Ministerial Health Fellowship can be natural partners with health care institutions. By focusing both on community and individual health; strengthening the community safety net; understanding community needs; addressing social determinants of health; and reducing health disparities through shared vision and goals, a community advocacy - health care partnership can create healthier, more equitable communities.

COMMUNITY HEALTH WORKERS

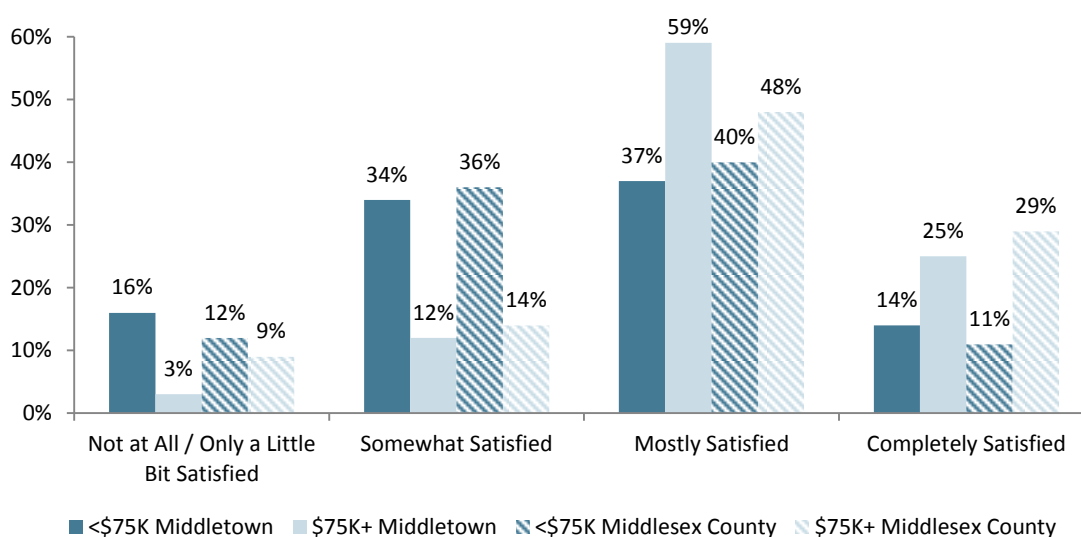
Community Health Workers (CHWs) play an important role in promoting health equity. A CHW is defined as a trained, frontline public health worker who is a trusted member of a community or has a close understanding of the community served. The trusting relationship enables the CHW to be uniquely qualified to serve as a liaison/link/intermediary between health/social services and community members who have traditionally lacked access to adequate care (APHA, 2019; Witmer, 1995). CHWs are often members of the care delivery team and provide outreach in the community served; conduct screenings; provide enrollment assistance; connect people to services; serve as information agents; oversee care coordination, case management and system navigation; provide coaching and social support; advocate for individuals and communities; and educate providers about the unique needs of the community and individual community members (The Community Guide, 2019). CHWs have demonstrated value as seen in improved access to quality and culturally appropriate care; reduction in chronic illnesses; better medical adherence; increased patient involvement; improvement in overall health; and reduced health care costs (CDC, 2019).

WELL-BEING

Well-being is not just the absence of disease or illness, it is a complex combination of a person’s physical, mental, emotional and social health factors, including various domains that are fundamental for well-being (e.g. quality relationships, resilience, realization of potential, economic stability, employment and job satisfaction, good living conditions, physical and social environmental factors, and community engagement), (CDC, 2019; Victoria State Government, 2019). Well-being tells us how people perceive their lives are going from their own perspective and is a positive outcome that is strongly linked to happiness and life satisfaction. Well-being has been found to be associated with self-perceived health, longevity, healthy behaviors, mental and physical health, social connectedness and productivity, and is a useful population outcome measure beyond morbidity and mortality as it provides a more holistic approach to disease prevention and health promotion (CDC, 2019).

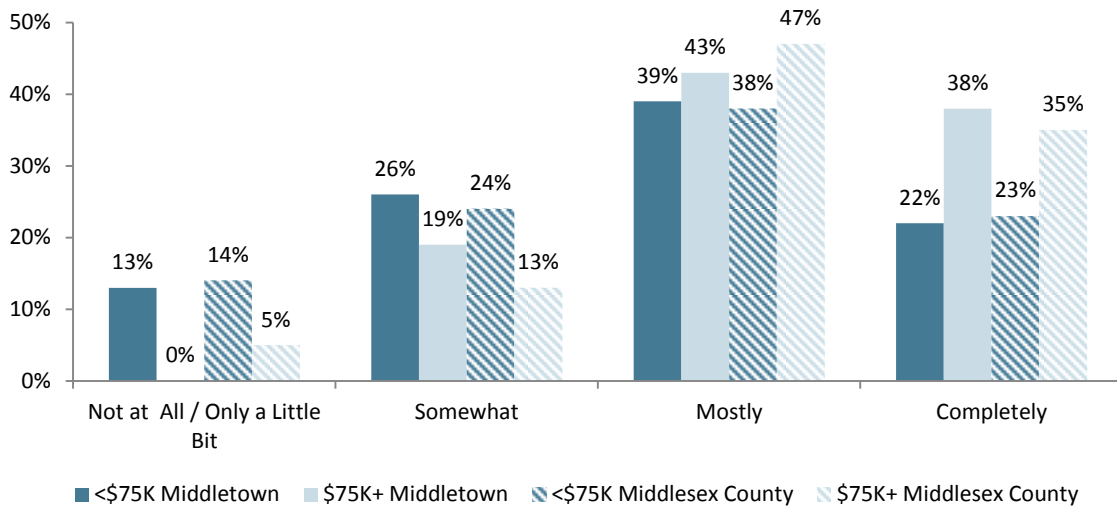
The 2018 DataHaven Community Wellbeing Survey included specific questions relative to well-being, as measured by satisfaction with life, happiness, hopelessness, anxiety level, and social and emotional support. In answer to all of the following questions – “overall, how satisfied are you with your life nowadays?”; “overall, how happy did you feel yesterday?”; “over the past 2 weeks, how often have you been bothered by feeling down, depressed, or hopeless?”; “overall, how anxious did you feel yesterday?”; and, “how often do you get the social and emotional support you need?” – those earning less than \$75,000 feel less satisfied (**Figure 41**), less happy (**Figure 42**), more depressed/hopeless (**Figure 43**), more anxious (**Figure 44**), and have less social and emotional supports (**Figure 45**) when compared to those earning \$75,000 and above.

Figure 41 - Satisfaction, “How Satisfied with Life Nowadays?” by Income



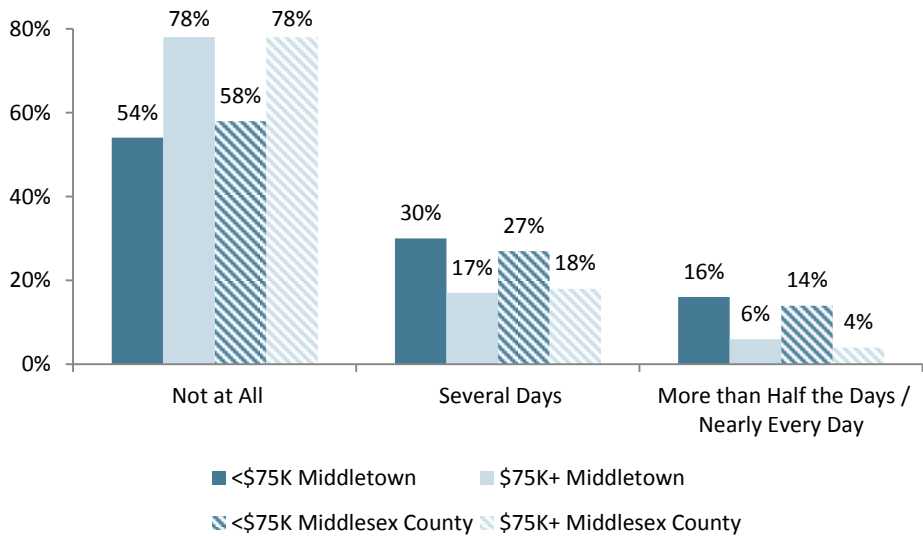
Source: DataHaven Community Wellbeing Survey, 2018

Figure 42 - Happiness, "How Happy as of Yesterday?" by Income



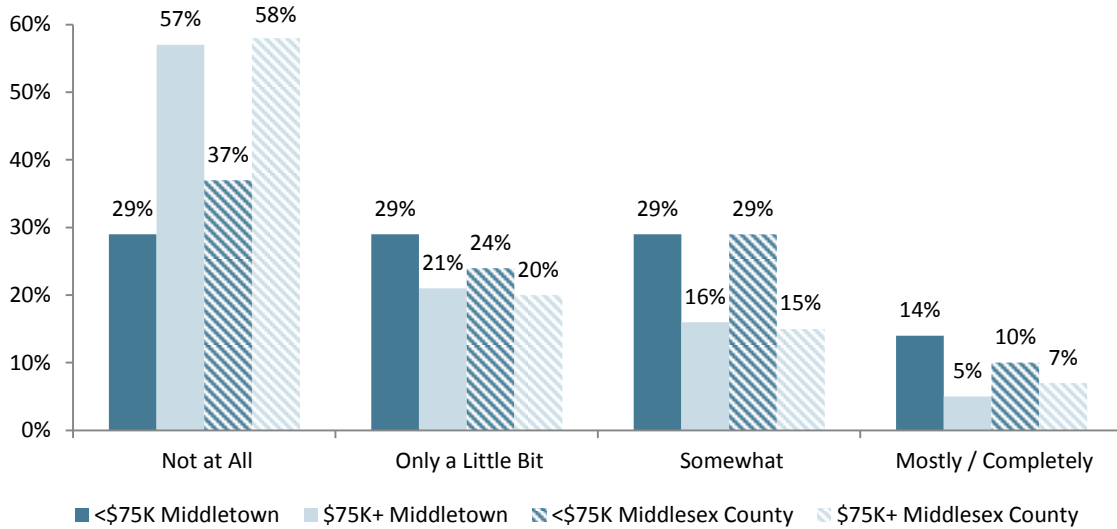
Source: DataHaven Community Wellbeing Survey, 2018

Figure 43 - Mental Wellbeing, "How Often Feeling Down, Depressed, or Hopeless?" by Income



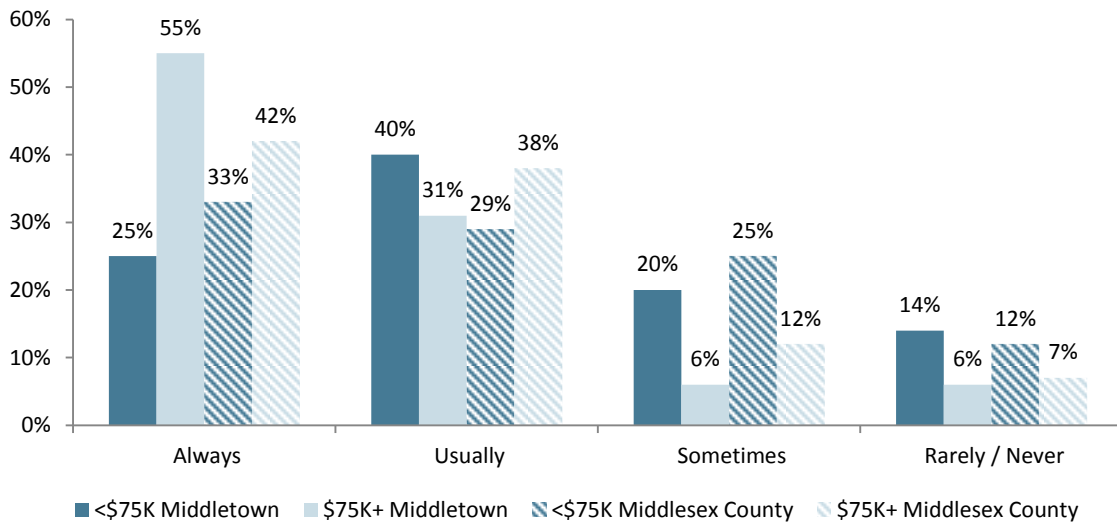
Source: DataHaven Community Wellbeing Survey, 2018

Figure 44 - Anxiety, “How Anxious as of Yesterday?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

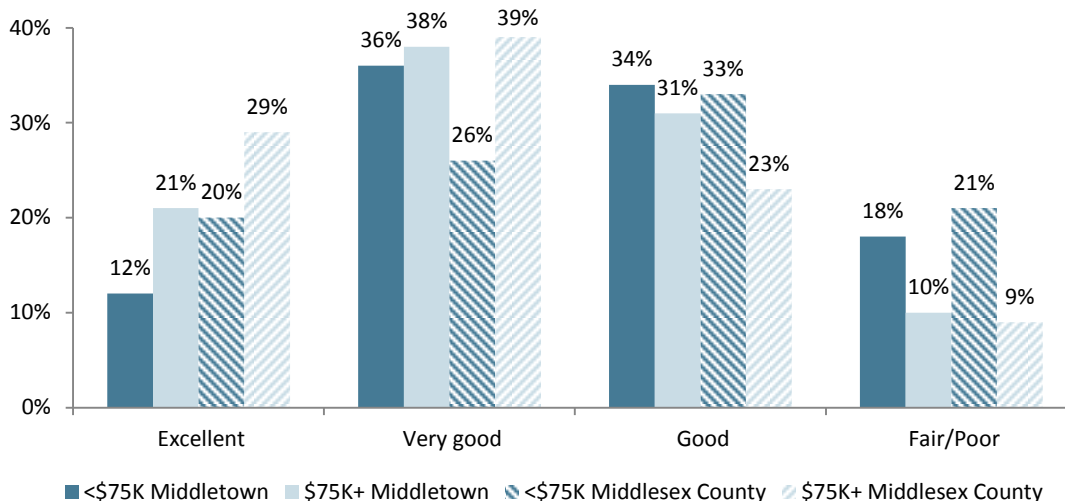
Figure 45 - Support, “Frequency of Getting Social and Emotional Support?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

To measure self-reported health status, the 2018 DataHaven Community Wellbeing Survey asked respondents, “how would you rate your overall health, would you say your health is excellent, very good, good, fair or poor?”. By income, on the outer bounds, those earning less than \$75,000 reported “excellent” less frequently and “fair/poor” more frequently when compared to those earning \$75,000 and above (Figure 46).

Figure 46 - Overall Health, “How is Your Health?” by Income



Source: DataHaven Community Wellbeing Survey, 2018

The County Health & Ranking Roadmaps provides well-being measures (Table 45), including a metric for insufficient sleep. A high percentage of adults in Middlesex County reported insufficient sleep (30.5%).

Table 45 - Wellbeing Measures, County Health Rankings & Roadmaps

	Middlesex County	Connecticut	Top Performers	U.S. Overall
Physical & Mental Health				
% Frequent Physical Distress	8.5%	10.3%	---	---
% Frequent Mental Distress	9.6%	11.2%	---	---
% Poor or Fair Health	10.2%	13.8%	---	---
Poor Health Days (# of days in past 30 days)				
Poor Physical Health Days	2.8 days	3.4 days	3.0 days	3.7 days
Poor Mental Health Days	3.2 days	3.8 days	3.1 days	3.8 days
Sleep				
% Insufficient Sleep	30.5%	33.3%	---	---

Source: County Health Rankings & Roadmaps 2019
Original data source: Behavioral Risk Factor Surveillance System (2016)

The key informant survey respondents were asked a question specific to well-being and to rate the degree to which they believed a variety of issues influence the health and well-being status of the community using a Likert scale of 1 - 5 with 1 = limited influence on community health and well-being; 3 = moderate influence on community health and well-being; and 5 = significant influence on community health and well-being. For this question, caregiver burden/burnout was defined as “stress for those who are caring for family/friends non-professionally” and job burnout was defined as “work-related stress”.

There was agreement between the community and hospital responses for the top 5 issues perceived as having significant influence on community health and well-being (**Figure 47**). **Table 46** presents the ranking of significant influence on community health and well-being of all eight response options by community and hospital.

Figures 47 - Key Informant Survey, Top 5 “Significant Influence on Community Health & Well-Being”

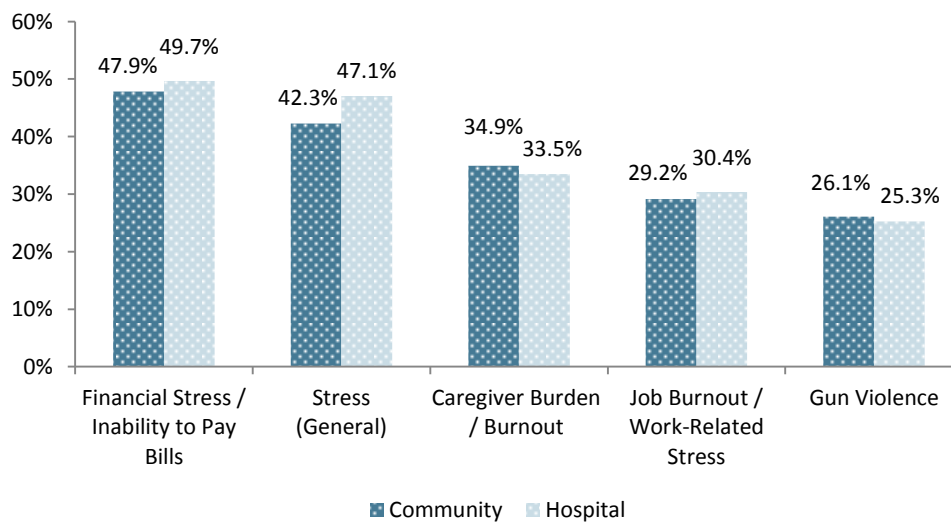


Table 46 - Key Informant Survey, “Significant Influence on Community Health and Well-Being”

Community Respondents		Hospital Respondents	
Indicators	% of Respondents	Indicators	% of Respondents
Financial Stress / Inability to Pay Bills	47.9%	Financial Stress / Inability to Pay Bills	49.7%
Stress (General)	42.3%	Stress (General)	47.1%
Caregiver Burden / Burnout	34.9%	Caregiver Burden / Burnout	33.5%
Job Burnout / Work-Related Stress	29.2%	Job Burnout / Work-Related Stress	30.4%
Gun Violence	26.1%	Gun Violence	25.3%
Interpersonal Violence	23.4%	Insomnia / Lack of Sleep	18.1%
Insomnia / Lack of Sleep	16.3%	Interpersonal Violence	15.2%
Elder Abuse / Neglect	13.9%	Elder Abuse / Neglect	14.7%



Part II

Health Indicators Data Overview

Health Indicators – ChimeData Study

Additional Health Indicators

Mental Health Indicators – ChimeData Study

Health Behavior Indicators

Youth Survey Data

Injuries – ChimeData Study

Vision for a Healthy Community

Ranked Indicators – ChimeData Study

Indicator Encounter Rates by Town – ChimeData Study

Indicator Relative Rates Composite – ChimeData Study

Encounter Rates – ChimeData Study

HEALTH INDICATORS

DATA OVERVIEW

We hope this overview is helpful when reviewing the following data tables and charts.

Age-Adjusted Calculation: data are often presented as “age-adjusted”. Age-adjustment is a statistical process that controls for the effects of age differences on health event rates. By calculating a weighted average, rates of disease, death, injuries and other health outcomes can be compared among groups with different age distributions. Said another way, it levels the impacts of variation among specific age groups.

Rate: a rate is a measurement of an event, disease or condition in relation to a unit of the population (e.g., per 100,000 people), which, in a specified time-frame, allows for comparison of a particular event in populations of different sizes. Rate can be calculated by the number of events/the total population x a standard value (1,000, 10,000 or 100,000) and is expressed by the standard value population. This process enables incidence and prevalence to be compared among communities with different population size structures.

ChimeData Study Overview: the data extraction for the DataHaven ChimeData study included de-identified hospital information for emergency department, inpatient, and observation encounters, by primary and secondary diagnoses, incurred by any residents of any town in Connecticut regardless of where the individual received treatment. Sixteen health and health-related indicators were analyzed and were benchmarked over two three year time periods (2012-2014 and 2015-2017).

ChimeData Study Calculations Overview: two methodologies were used for the DataHaven ChimeData study: 1) annualized *age-adjusted* encounter rates per 10,000 residents, and 2) annualized encounter rates per 10,000 residents. Data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize.

Age-adjusted rates are helpful for identifying risk and overall burden. For the DataHaven ChimeData study, the age-adjusted rates are presented as a single total value for each indicator, that is, for all age groups combined. Age-adjusted rates were not calculated for asthma as the prevalence of asthma is more consistent for all ages (except for children which is a challenging group to age-adjust).

Encounter rates are useful for examining differences between populations. For the ChimeData study, encounter rates (with no age-adjustment) were used to look at the data by age group and gender in order to identify variations within these subgroups. For each indicator, DataHaven provided annualized encounter rates by gender and for six age strata (0-19, 20-44, 45-64, 65-74, 75-84, and 85+ years). For asthma, in order to capture children, a different age strata was used (0-4, 5-19, 20-44, 45-64, 65-74, and 75+ years).

For the asthma data in the DataHaven ChimeData study, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators, as no asthma age-adjusted rates were calculated.

DataHaven also provided graphs for annualized relative encounter rates per 10,000 residents where the State of Connecticut is set at 1.0 as a benchmark. Each health and health-related indicator for Middlesex County and each town in Middlesex Health's service area is ranked against the state to assist with prioritizing issues. Of note are the relative rate results for Middletown, where many of the indicators are close to/higher than the state, indicating that issues are more concentrated in Middletown when compared to other towns in Middlesex Health's service area.

DATAHAVEN CHIMEDATA STUDY TOWN LEVEL COMPANION REPORT

As an extension of this CHNA, town level data for each indicator from the DataHaven ChimeData study for the towns in Middlesex Health's service area are included in a companion report that can be accessed at <https://middlesexhealth.org/middlesex-and-the-community/serving-our-community/community-health-needs-assessment>. In this CHNA, Middletown data has been presented for each of the ChimeData indicators, benchmarked against Middlesex County and Connecticut, as Middletown consistently has encounter rates that are higher than the state for several conditions.

MIDDLESEX HEALTH CANCER CENTER COMMUNITY HEALTH NEEDS ASSESSMENT

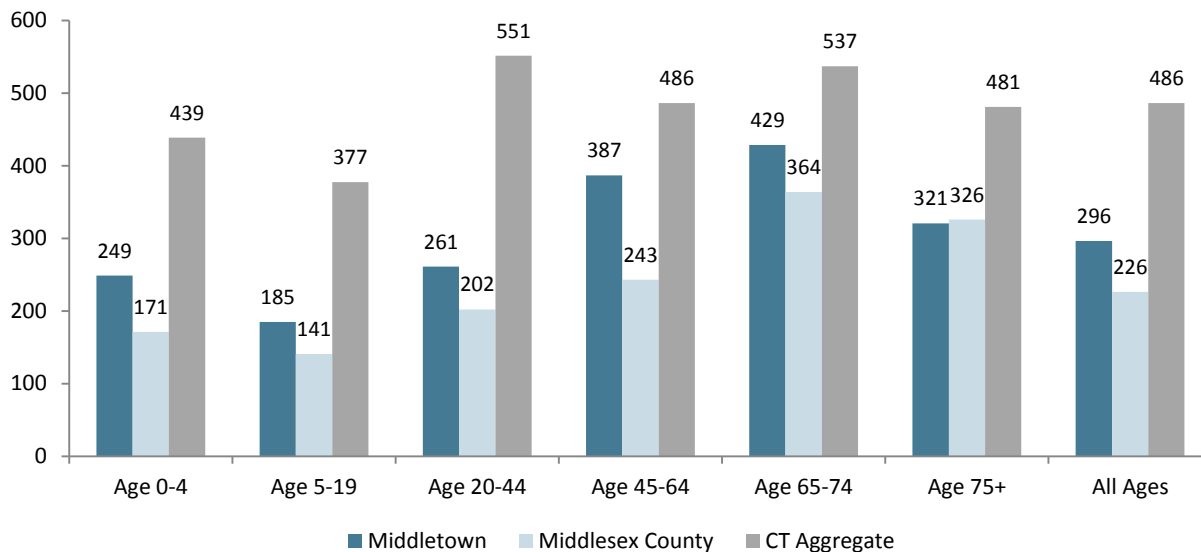
For an in-depth snapshot of cancer-related issues in the community, please refer to the Middlesex Health Cancer Center CHNA, which can be accessed at middlesexhealth.org/cchna.

HEALTH INDICATORS – CHIMEDATA STUDY

This section reviews the health indicator encounter rates from the DataHaven ChimeData study for Middletown, Middlesex County and Connecticut for the 2015-2017 time frame.

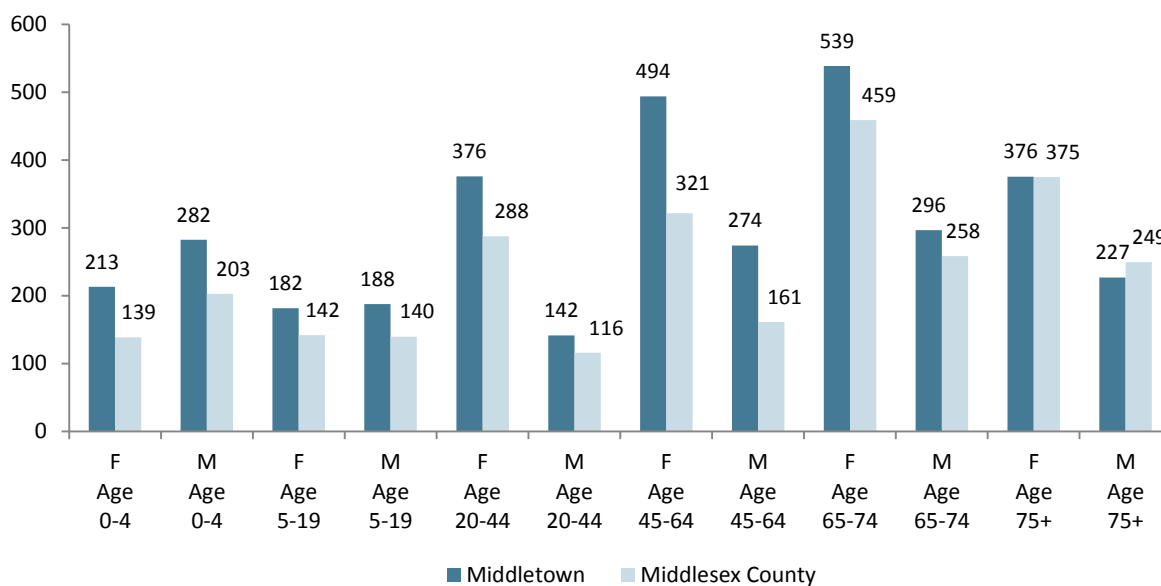
ASTHMA

Figure 48 - Asthma, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

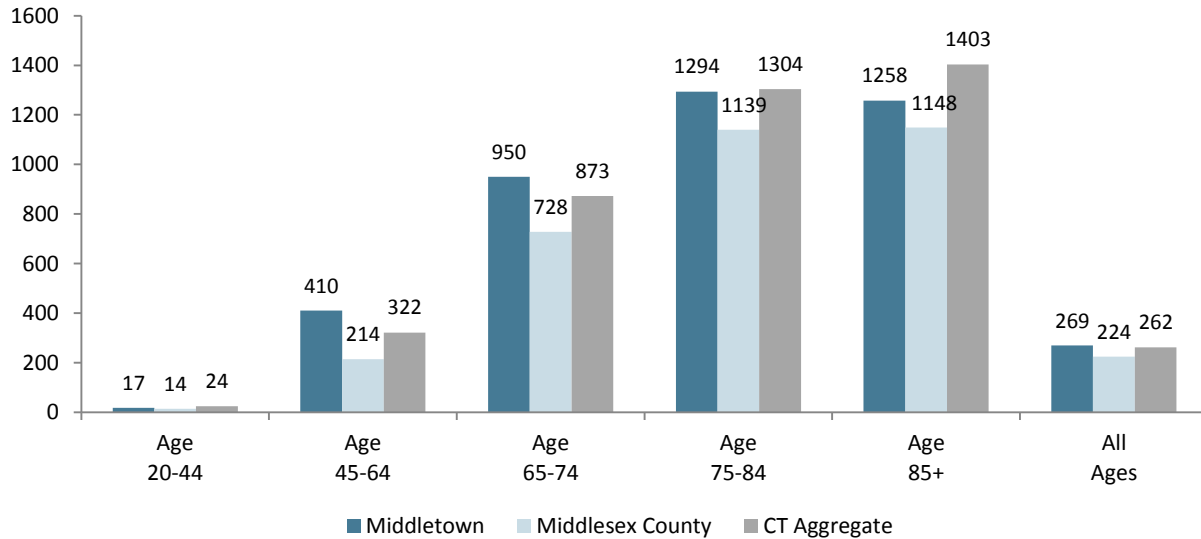
Figure 49 - Asthma, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

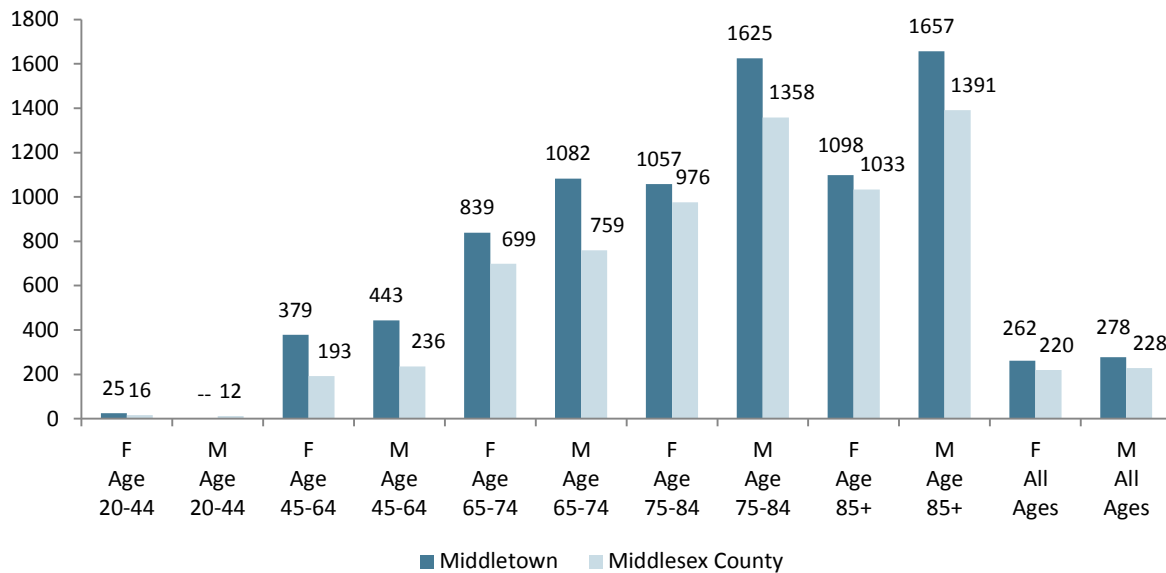
CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

Figure 50 - COPD, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Figure 51 - COPD, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017

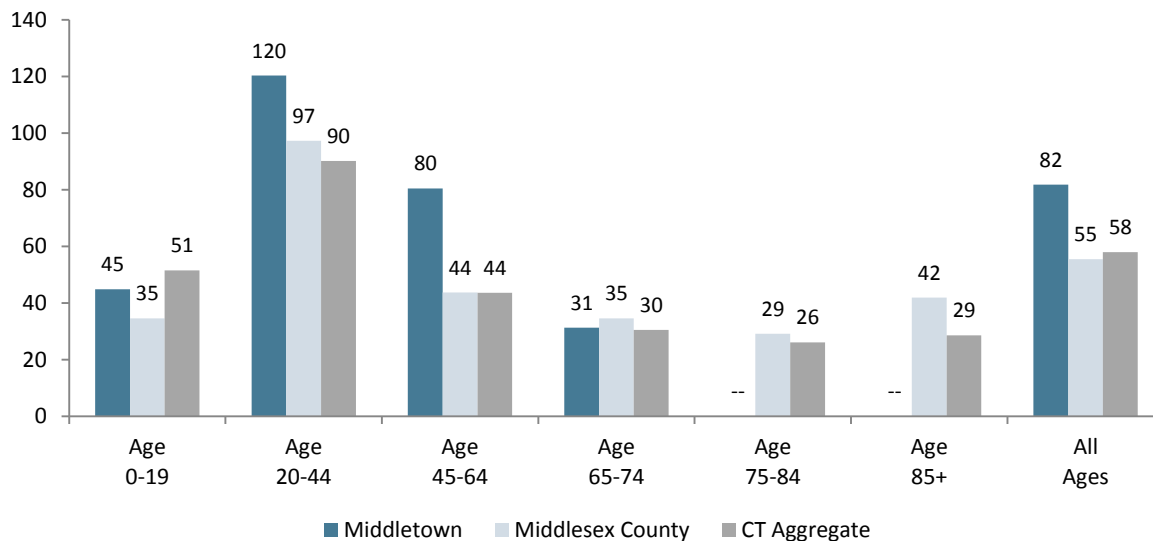


Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

DENTAL

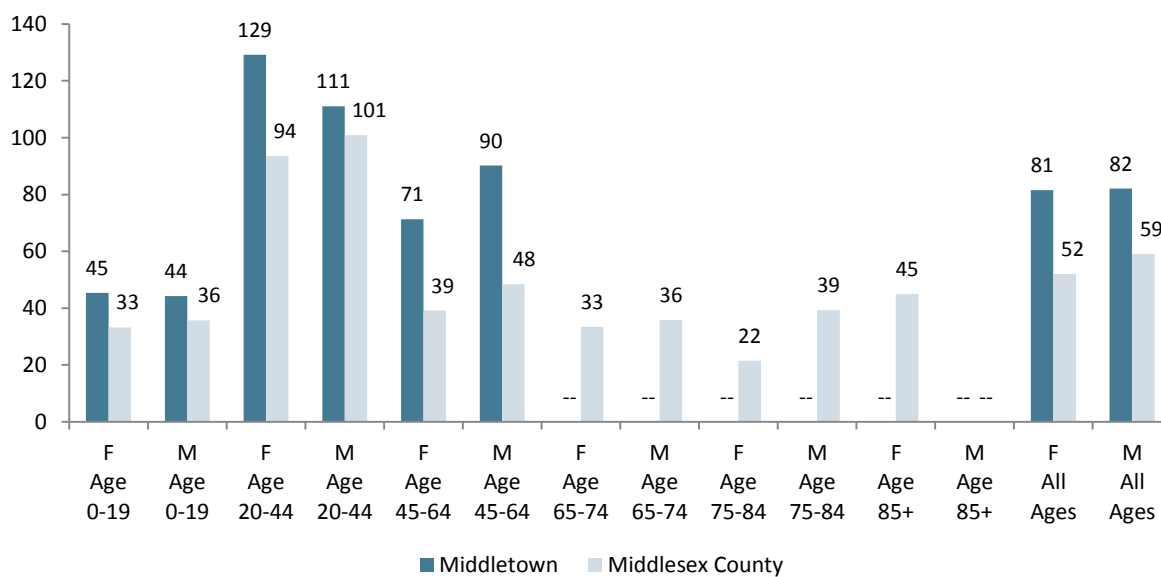
Figure 52- Dental, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

Figure 53 - Dental, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017

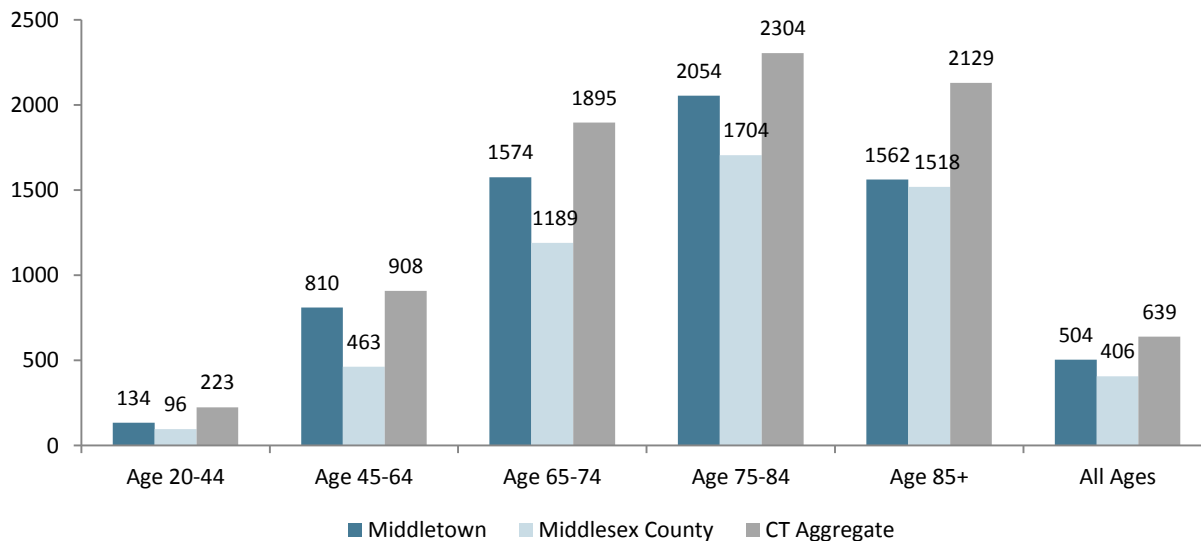


Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

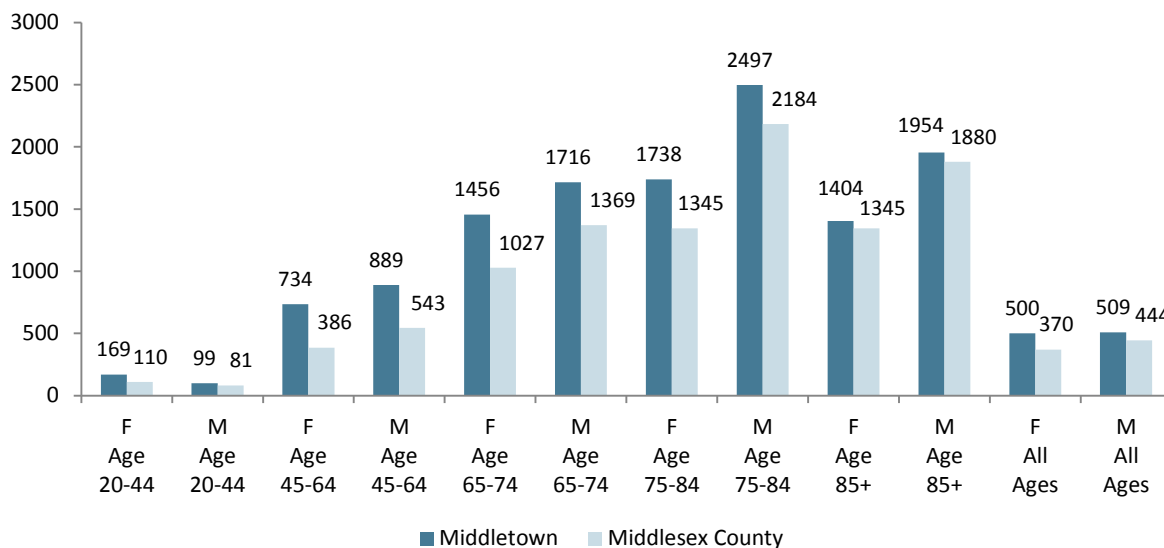
DIABETES

Figure 54 - Diabetes, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

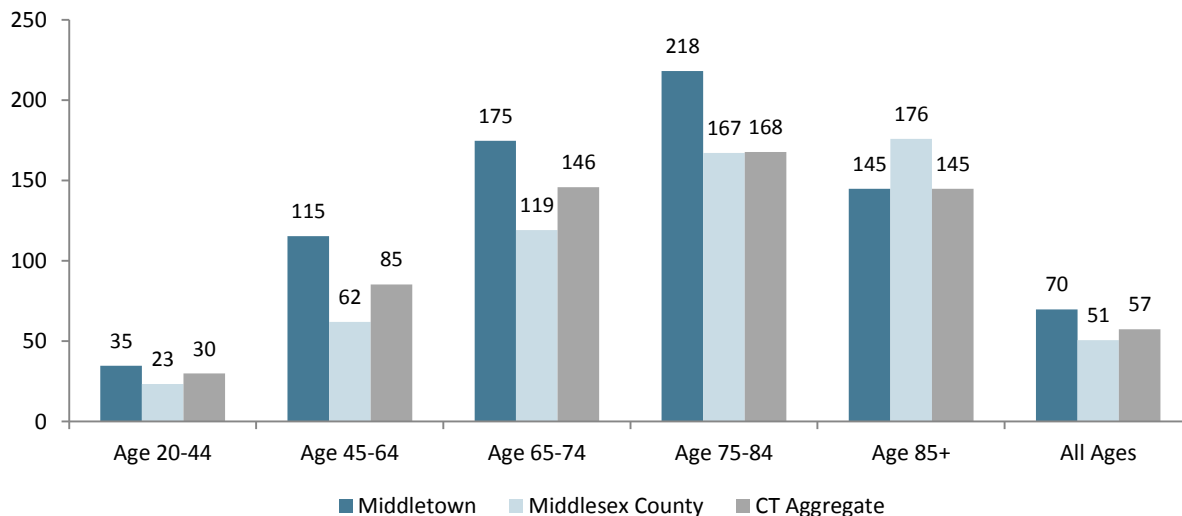
Figure 55 - Diabetes, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

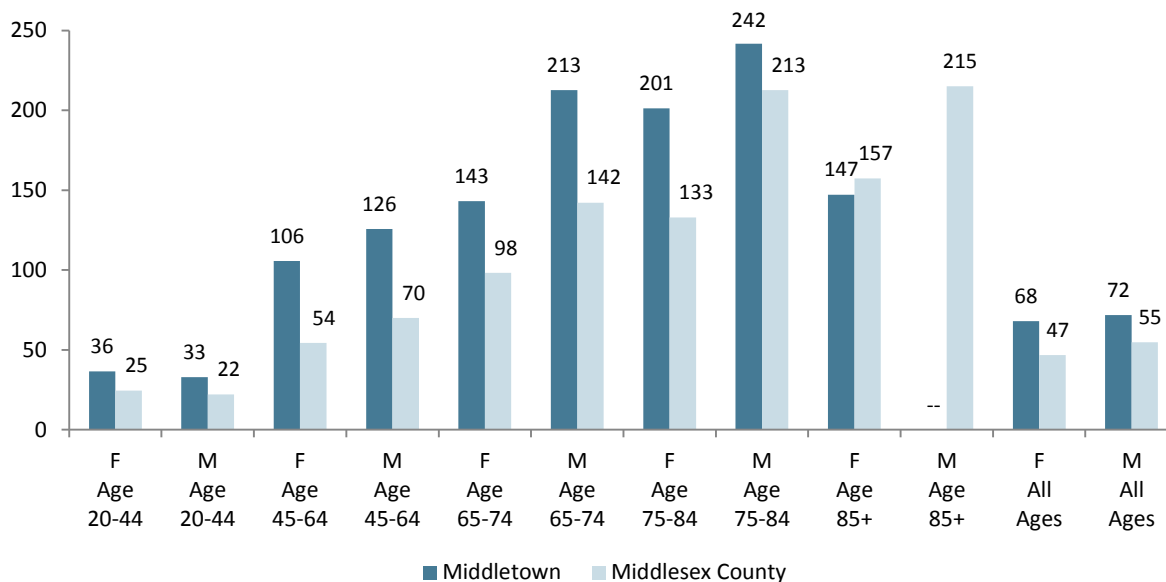
DIABETES UNCONTROLLED

Figure 56 - Diabetes Uncontrolled, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Figure 57 - Diabetes Uncontrolled, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017

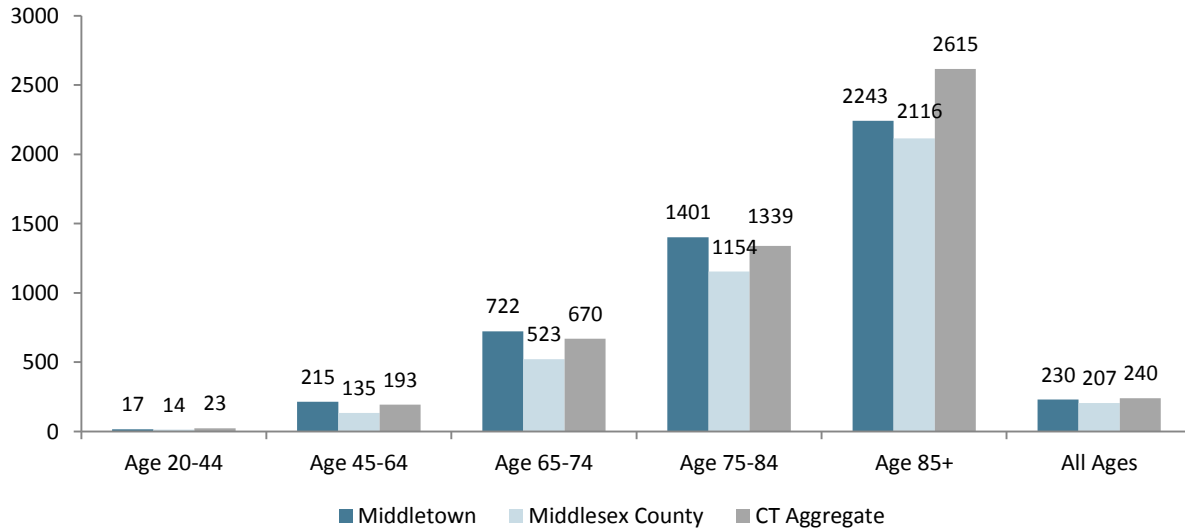


Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

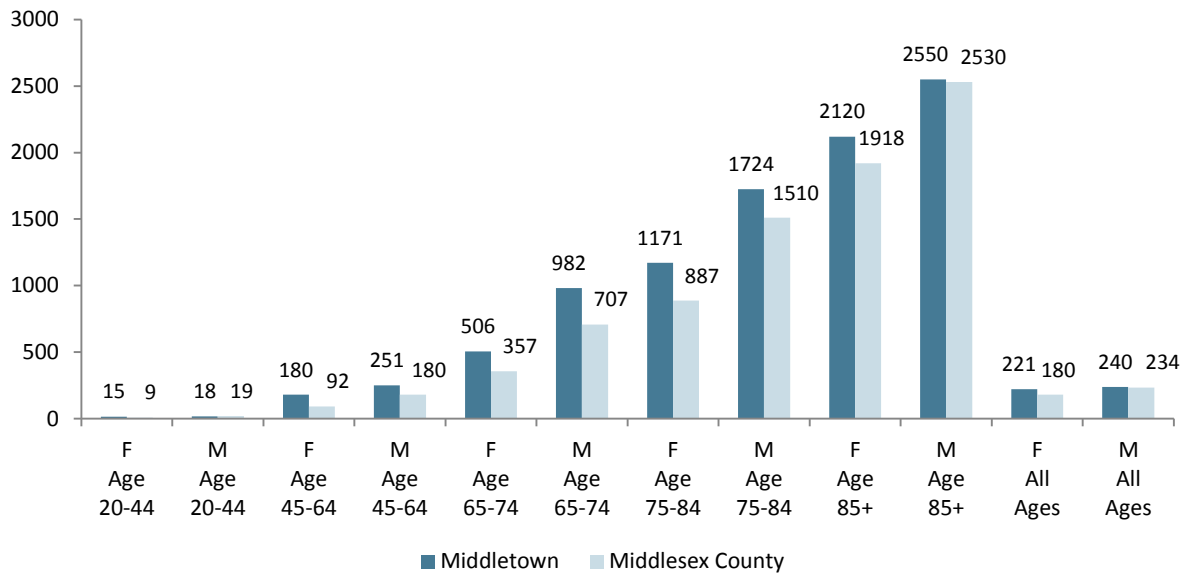
HEART DISEASE

Figure 58 - Heart Disease, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

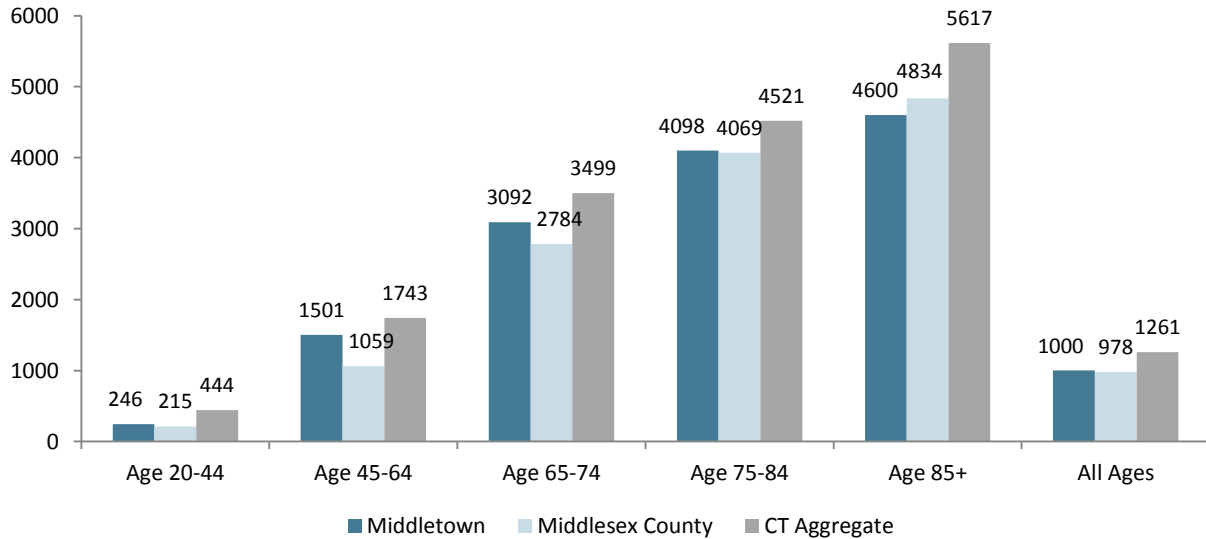
Figure 59 - Heart Disease, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

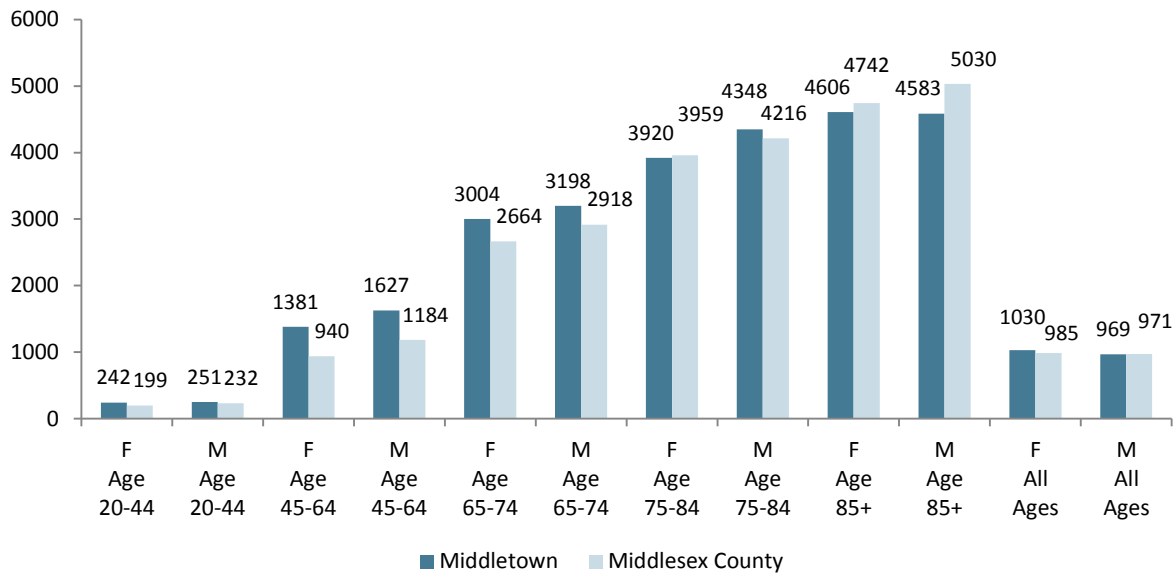
HYPERTENSION

Figure 60 - Hypertension, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

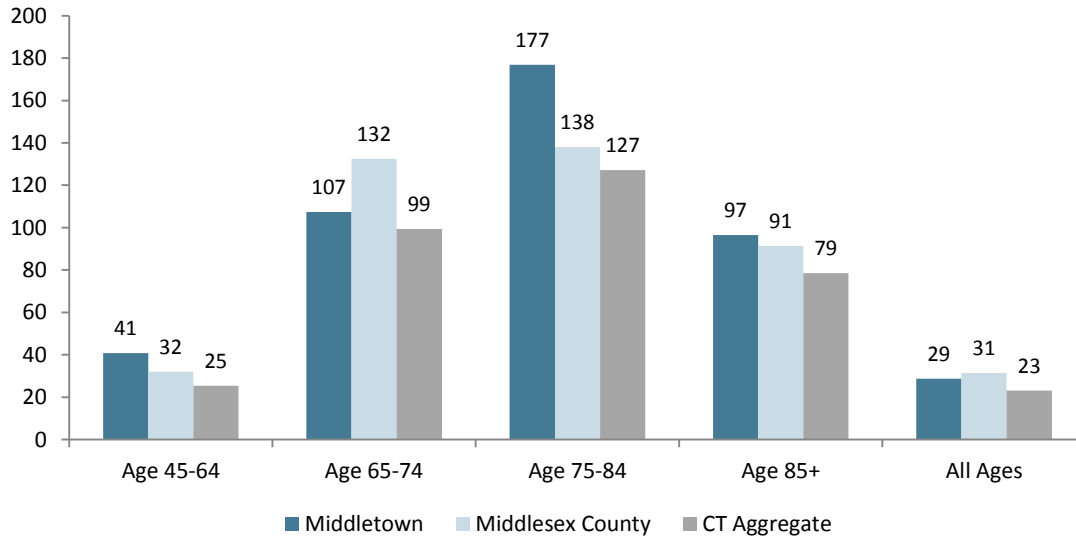
Figure 61 - Hypertension, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

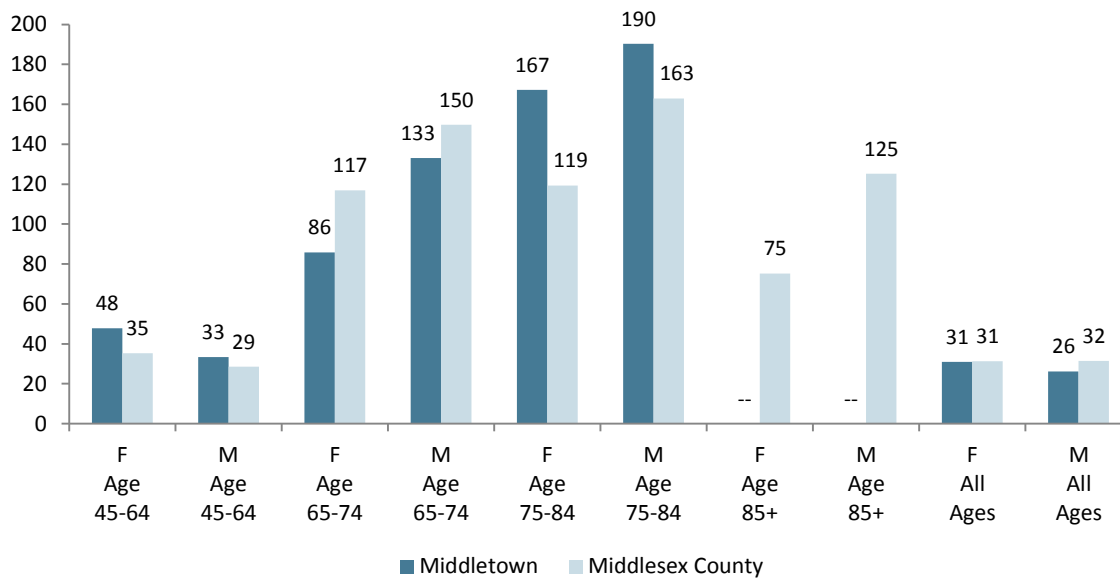
LUNG CANCER

Figure 62 - Lung Cancer, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Figure 63 - Lung Cancer, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017

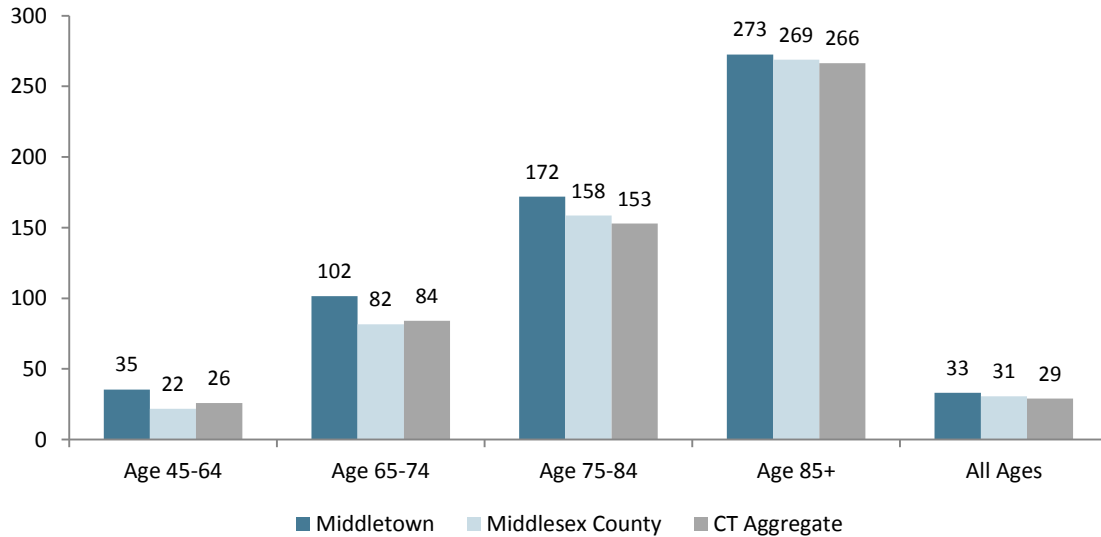


Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

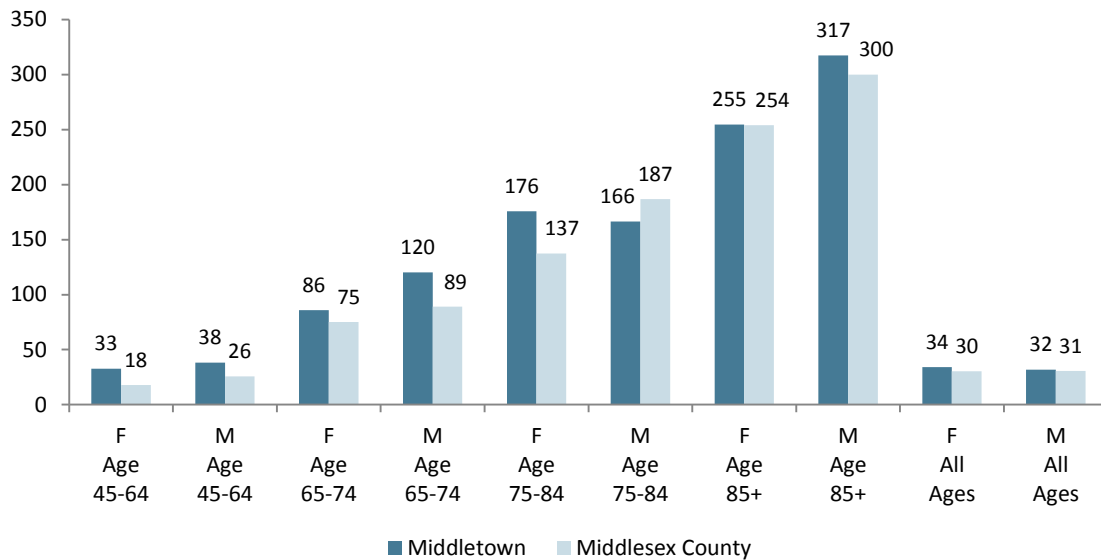
STROKE

Figure 64 - Stroke, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Figure 65 - Stroke, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

ADDITIONAL HEALTH INDICATORS

The 2018 DataHaven Community Wellbeing Survey included questions regarding specific health indicators, asking, “*have you ever been told by a doctor or health professional that you have any of the following?*”. “Yes” responses for hypertension, heart attack and diabetes for Middletown and Middlesex County track with the state (**Table 47**). Notable is the high percentage of affirmations for hypertension (26% for Middletown and 28% for Middlesex County). There was a considerably higher “yes” response to the presence of asthma by Middletown respondents (21%) when compared to Middlesex County (13%) and Connecticut (15%).

Table 47 - Health Indicator Status

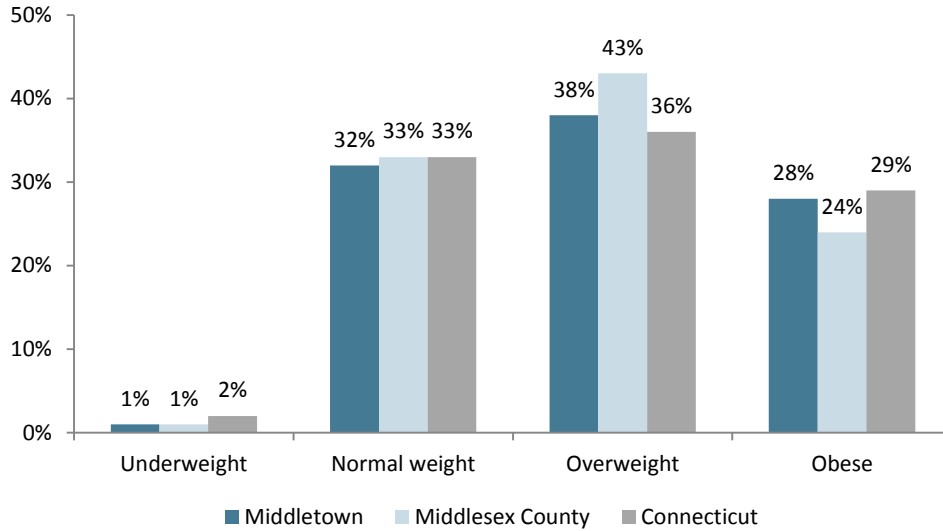
	Middletown	Middlesex County	Connecticut
High blood pressure or hypertension			
Yes	26%	28%	30%
No	71%	70%	69%
Heart disease or have you ever had a heart attack			
Yes	4%	6%	6%
No	93%	93%	93%
Diabetes			
Yes	9%	7%	10%
No	88%	91%	89%
Asthma			
Yes	21%	13%	15%
No	78%	85%	84%
(If have asthma) Do you still have asthma?			
Yes	60%	68%	69%
No	40%	30%	30%
Current Asthma Rate*	13%	9%	10%

* Current asthma rate based on Wellbeing Survey responses

Source: DataHaven Community Wellbeing Survey, 2018

For BMI (body mass index), which is based on height and weight, there is alignment between Middletown, Middlesex County and Connecticut for underweight, normal weight, overweight and obese, except where Middlesex County has a moderately higher percentage of overweight and moderately lower percentage of obese (**Figure 66**). Of note is the total percentage of overweight and obese combined: 66% in Middletown, 67% in Middlesex County and 65% in Connecticut.

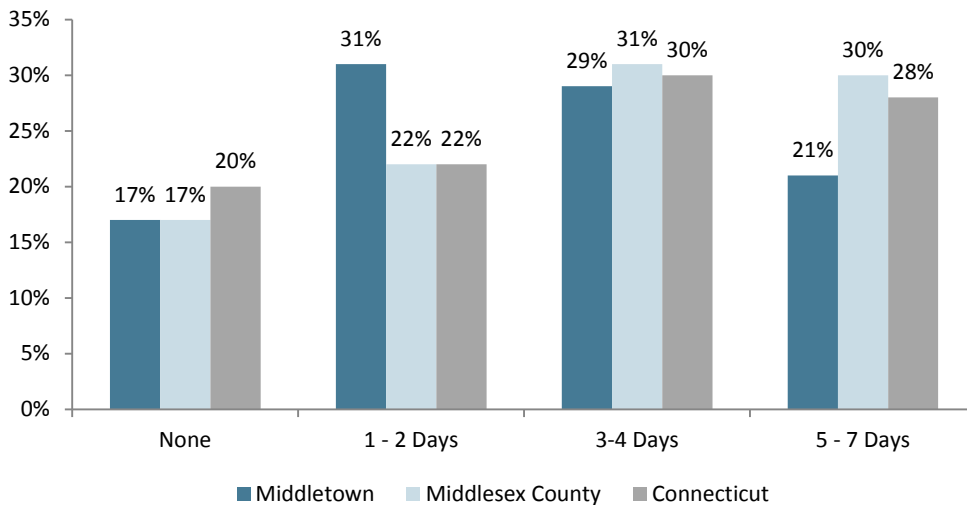
Figure 66 - Body Mass Index Categories



Source: DataHaven Community Wellbeing Survey, 2018

In answer to the 2018 DataHaven Wellbeing Survey question, *“in an average week, how many days per week do you exercise?”*, there was a high percentage of respondents confirming exercise levels from 1-2 days/week, 3-4 days/week and 5-7 days/week, with Middletown residents reporting more exercise 1-2 days/week and less exercise 5-7 days/week when compared to Middlesex County and Connecticut (**Figure 67**).

Figure 67 - Frequency of Weekly Exercise



Source: DataHaven Community Wellbeing Survey, 2018

The 2018 DataHaven Community Wellbeing Survey responses align with the County Health & Ranking Roadmaps for diabetes, obesity and physically inactive for Middlesex County (**Table 48**).

Table 48 - Health Indicator Status, County Health Rankings & Roadmaps

	Middlesex County	Connecticut	U.S. Overall
% Diabetic Prevalence	7.3%	8.7%	---
% Adult Obesity	24.8%	25.5%	29%
% Physically Inactive	17.5%	19.3%	22%

Adult Obesity: % of adults that report a BMI ≥ 30

Physically Inactive: % of adults aged 20 and over reporting no leisure-time physical activity

Source: County Health Rankings & Roadmaps 2019

Original data source: CDC Diabetes Interactive Atlas (2015)

Regarding health risk factors from the 2018 DataHaven Community Wellbeing Survey, DataHaven has provided a synopsis of total responses for selected health and health-related indicators for Middletown and Middlesex County benchmarked against Connecticut (**Table 49**).

Table 49 - Health Risk Factors, 2018 DataHaven Community Wellbeing Survey

	Middletown	Middlesex County	Connecticut
Very Good Self Rated Health	53%	58%	59%
Anxiety	9%	9%	12%
Diabetes	9%	7%	10%
Current Asthma	13%	9%	11%
Obesity	28%	24%	29%
Depression	10%	9%	9%
Dental Visit in Past Year	75%	76%	74%
Smoking	17%	13%	14%
Food Insecure	15%	9%	13%

Source: DataHaven Community Wellbeing Survey, 2018

The key informant survey respondents were asked to rate the degree to which they believed a list of 20 medical conditions, diseases and health topics influence the health outcomes in their communities using a Likert scale of 1 - 5 with 1 = limited impact on community health; 3 = moderate impact on community health; and 5 = significant impact on community health. An “other” response option was provided with the ability to record an answer via text box. Adverse Childhood Experiences was defined as “abuse, neglect, traumatic experiences for people under age 18” and Unintentional Injuries was defined as “car accidents, falls, etc.”.

Figures 68a and **68b** present the top five community and hospital responses for significant impact on the health of the community. There is alignment with all five response, but two of the responses are in different rank order (for the hospital respondents, substance abuse was ranked second, and mental

health issues for adolescents was ranked as third). The rank order of all 29 response options by community and hospital can be found in **Tables A9a** and **A9b** in the **Appendix**.

Figure 68a - Key Informant Survey, Top 5 Significant Impact on Community Health, Community

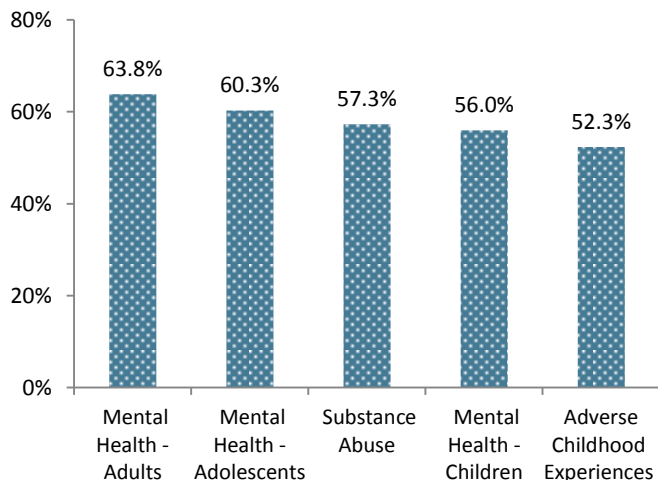
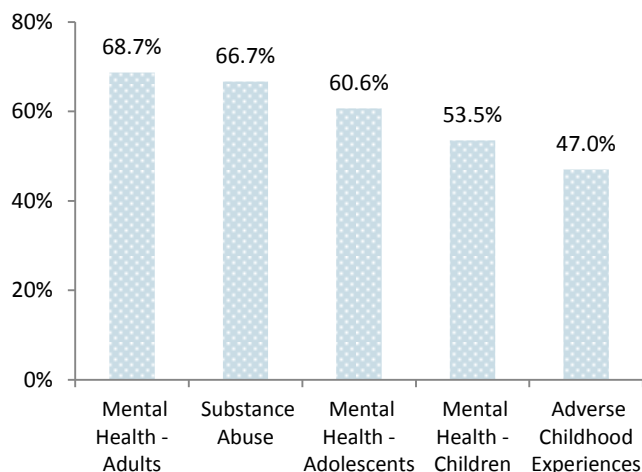


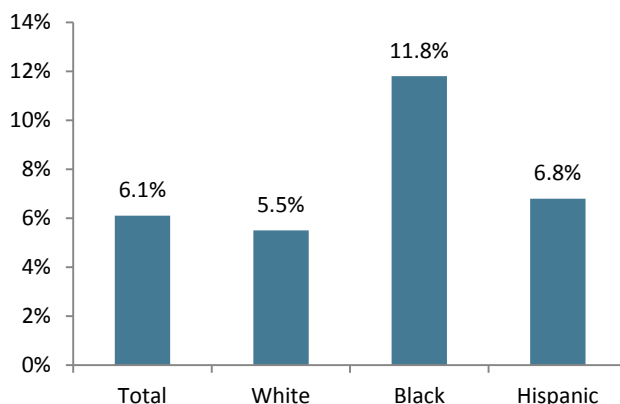
Figure 68b - Key Informant Survey, Top 5 Significant Impact on Community Health, Hospital



BIRTH WEIGHT

Figure 69 reveals a significant disparity in low birth weight (less than 5.5 pounds) for Black babies when compared to White babies for Middlesex County. Black babies are 2.1 times more likely to experience low birth weight when compared to White babies.

Figure 69 - Low Birth Rate by Race/Ethnicity, Middlesex County



Low Birth Weight: % of live births with low birth weight (< 2500 grams)

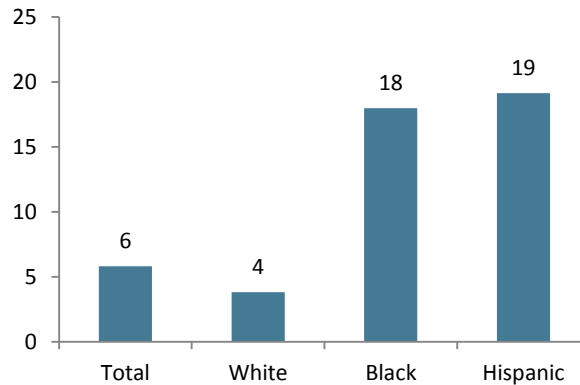
Source: County Health Rankings & Roadmaps 2019

Original data source: National Center for Health Statistics – Natality files (2011 -2017)

TEEN BIRTH RATE

For the teen birth rate in Middlesex County, Black teens are 4.5 times and Hispanic teens are 4.75 times more likely to deliver children when compared to White teens (**Figure 70**).

Figure 70 - Teen Birth Rate by Race/Ethnicity, Middlesex County



Teen Birth Rate: # of births per 1,000 female population ages 15-19

Source: County Health Rankings & Roadmaps 2019

Original data source: National Center for Health Statistics – Natality files (2011 -2017)

COMMUNICABLE DISEASE

Table 50 - HIV Prevalence and Chlamydia Rates

	Middlesex County	Connecticut
HIV Prevalence Rate	190	339
Chlamydia Rate	218.2	387.4

Rate: per 100,000 population, new cases

Source: County Health Rankings & Roadmaps 2019

Original data sources:

HIV: National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (2015)

Chlamydia: National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (2016)

PREVENTABLE HOSPITAL STAYS (MEDICARE)

Table 51 - Preventable Hospital Rate, Medicare Enrollees

	Middlesex County	Connecticut	Top Performers	U.S. Overall
Total	3990	4220	2765	4520
White	3851	---	---	---
Black	6154	---	---	---
Hispanic	5986	---	---	---

Preventable hospital stays: # of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees

Source: County Health Rankings & Roadmaps 2019

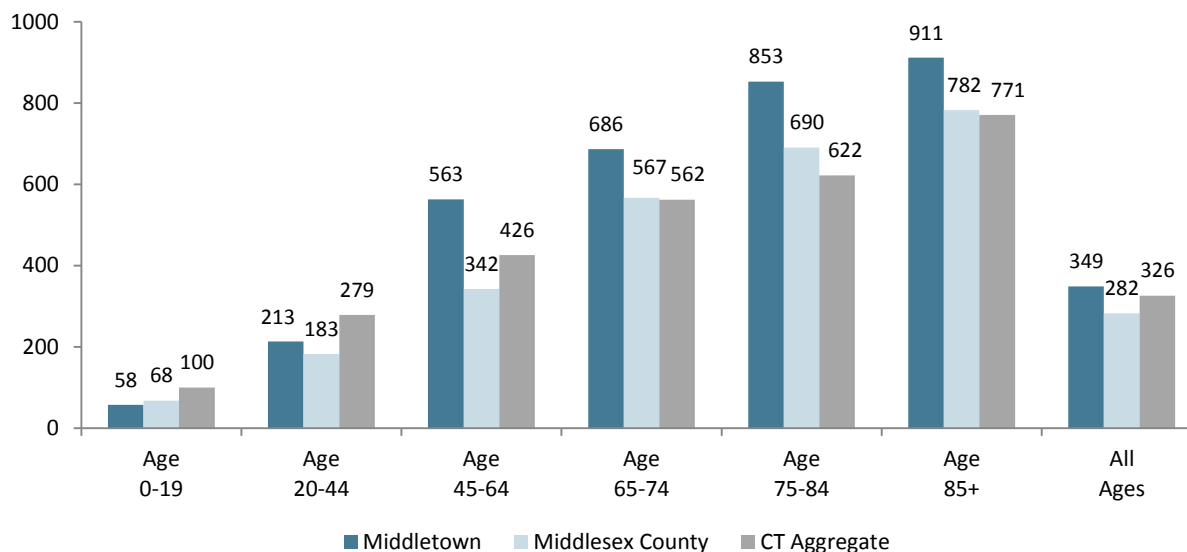
Original data source: Mapping Medicare Disparities Tool (2016)

MENTAL HEALTH INDICATORS – CHIMEDATA STUDY

This section reviews the mental health indicator encounter rates from the DataHaven ChimeData study for Middletown, Middlesex County and Connecticut for the 2015-2017 time frame.

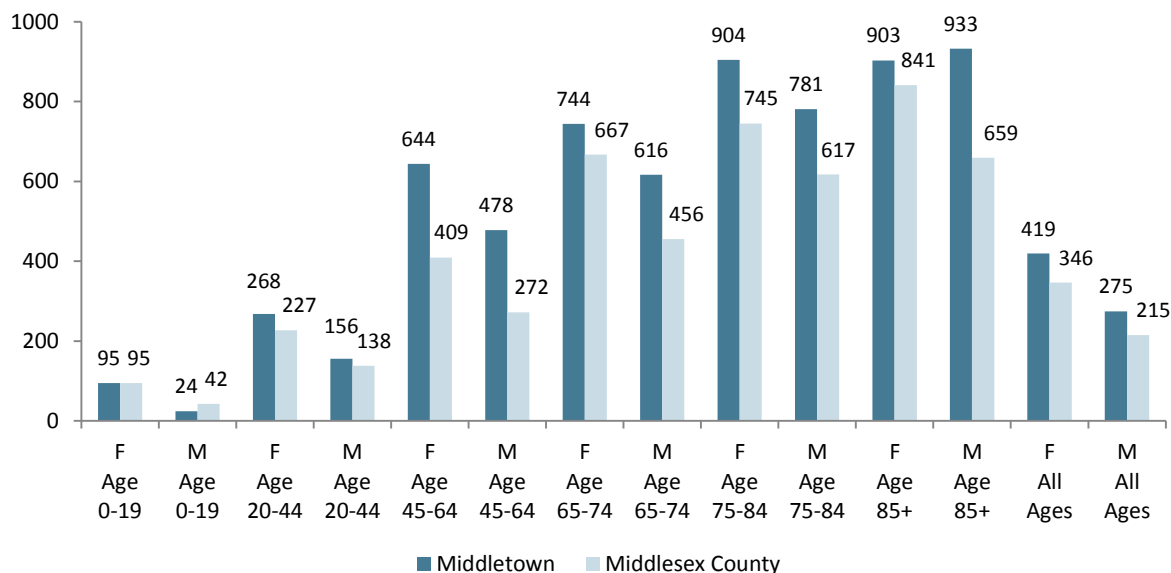
DEPRESSIVE DISORDER

Figure 71 - Depressive Disorder, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

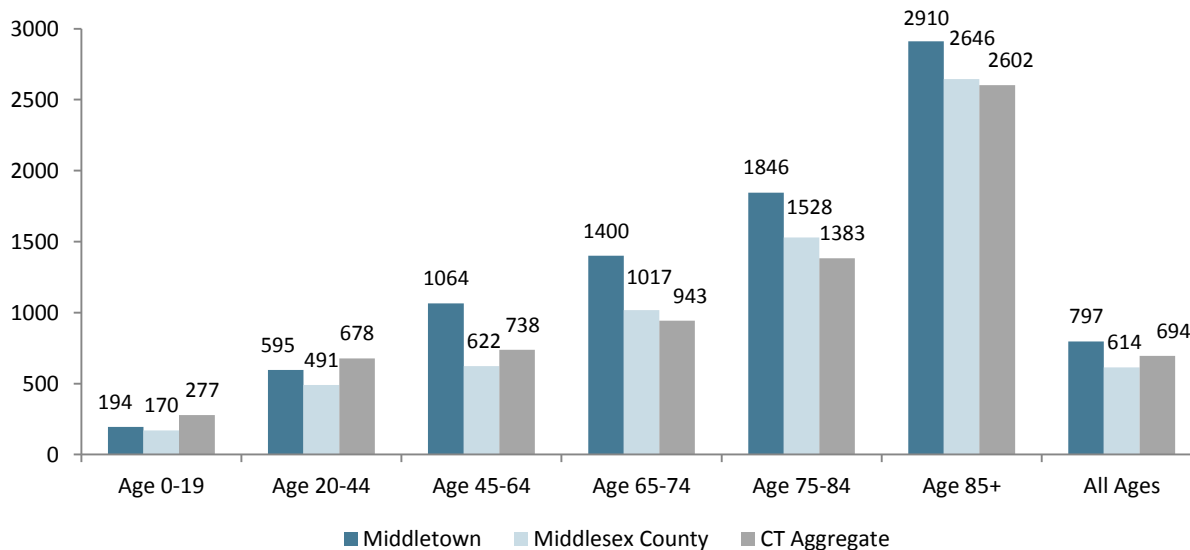
Figure 72 - Depressive Disorder, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

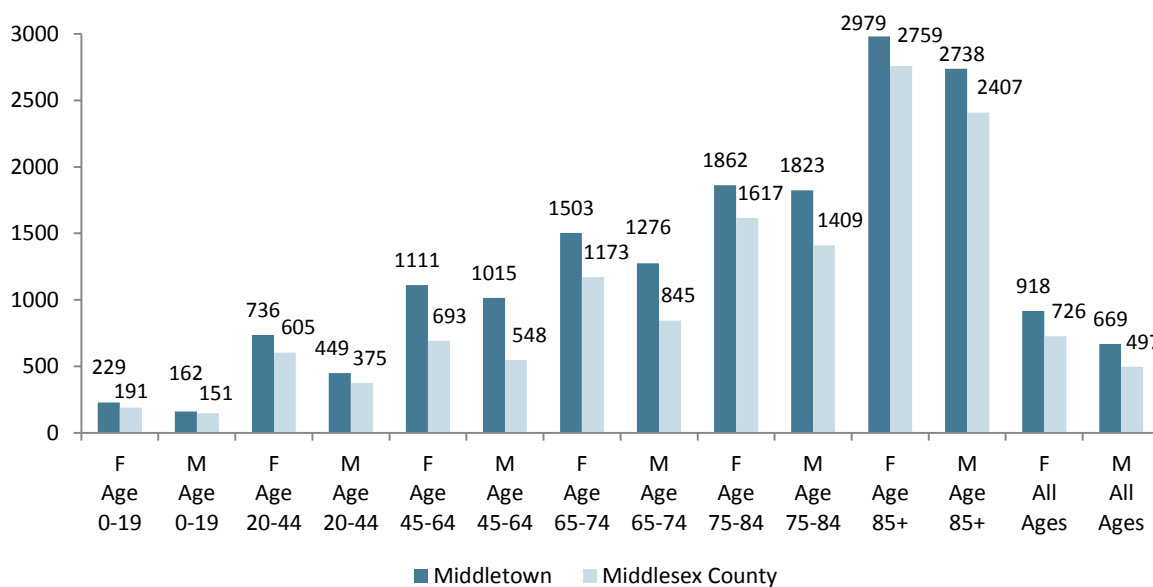
MENTAL DISORDER

Figure 73 - Mental Disorder, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Figure 74 - Mental Disorder, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



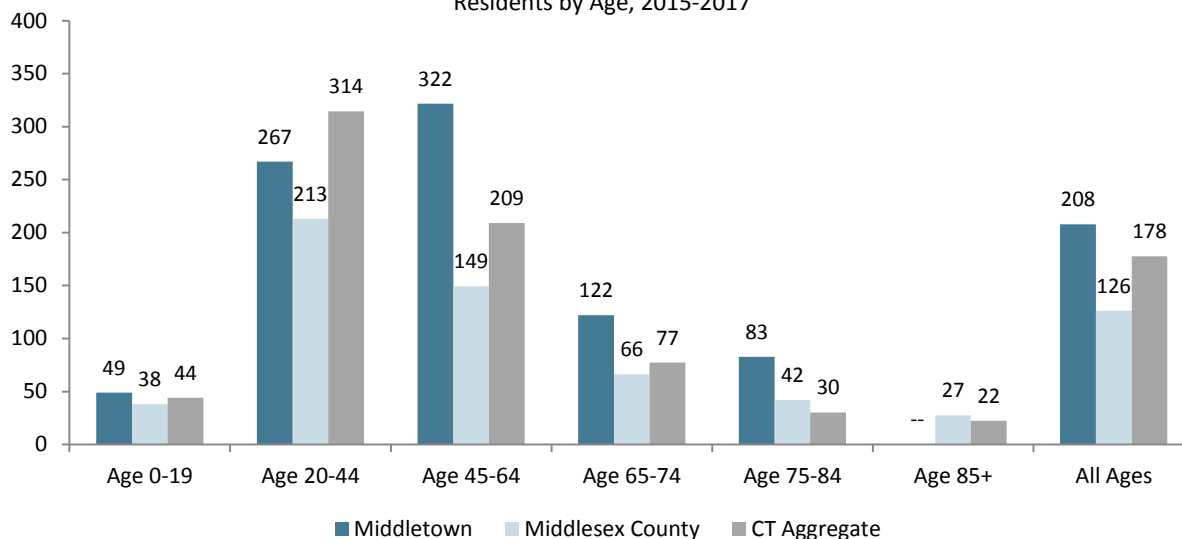
Source: DataHaven Analysis of CHA CHIME data, 2019

HEALTH BEHAVIOR INDICATORS

Figures 74 and 75 review the health behavior indicator encounter rates from the DataHaven ChimeData study for Middletown, Middlesex County and Connecticut for the 2015-2017 time frame.

SUBSTANCE USE DISORDER CHIMEDATA STUDY

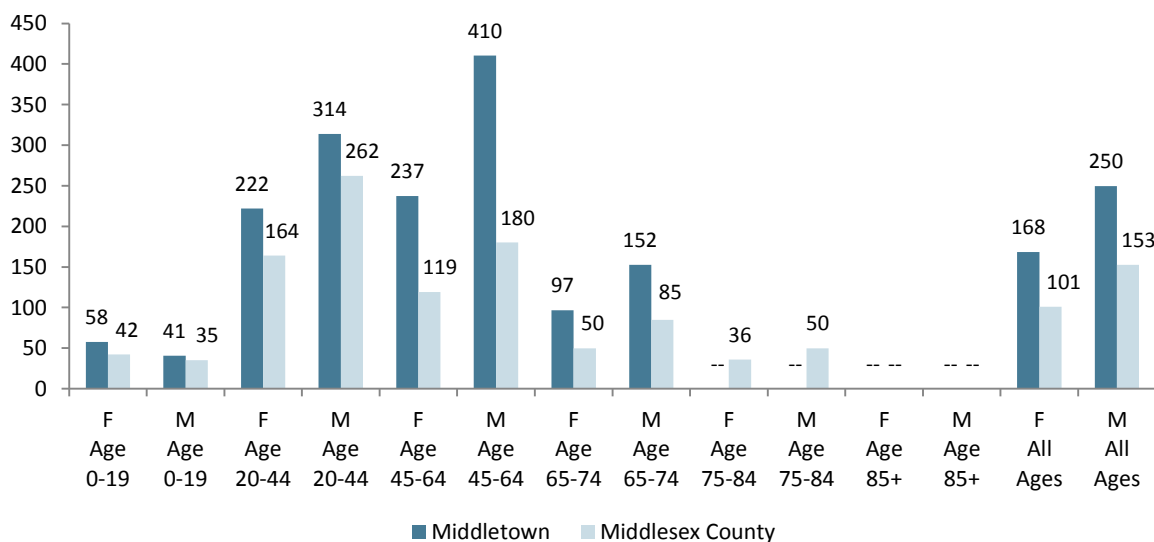
Figure 75 - Substance Abuse, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

Figure 76 - Substance Abuse, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



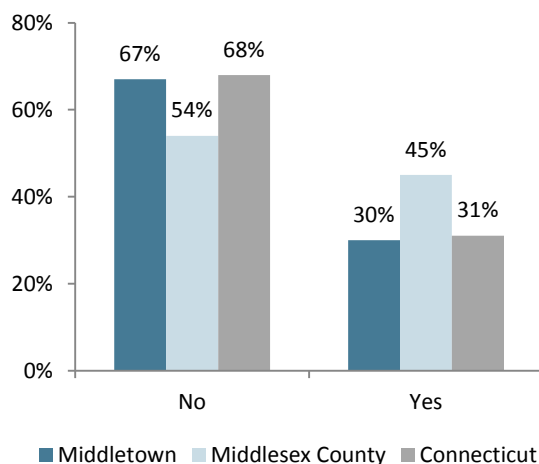
Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

OPIOIDS

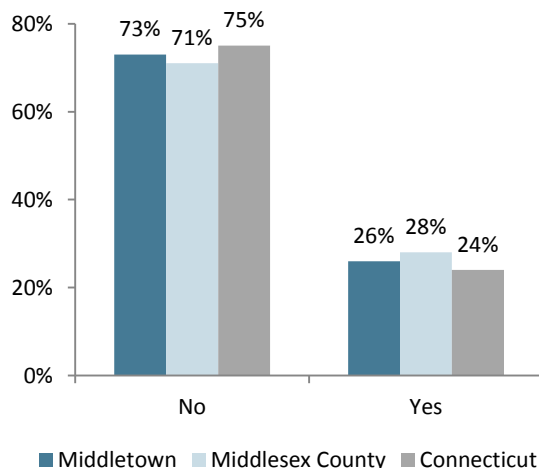
The 2018 DataHaven Community Wellbeing Survey asked respondents questions about prescription painkillers and opiate use. **Figures 77** and **78** aggregate the “yes” answers to the question, “do you personally know anyone who has struggled with misuse or addiction to heroin or other opiates such as prescription painkillers at any point during the last 3 years?”, and “do you personally know anyone who has ever died from an opioid overdose?”. **Table 52** gives more granularity to the response options and also outlines the type of person who has struggled.

Figure 77 - “Do You Know Anyone who has Struggled with Opiate Use?”



Source: DataHaven Community Wellbeing Survey, 2018

Figure 78 - “Do You Know Anyone who has Died from an Opioid Overdose?”



Source: DataHaven Community Wellbeing Survey, 2018

Table 52 - Opiate Use Detail

	Middletown	Middlesex County	Connecticut
Do you personally know anyone who has struggled with misuse or addiction to heroin or other opiates such as prescription painkillers at any point during the last 3 years?			
No	67%	54%	68%
Yes, one person	11%	14%	13%
Yes, 2 to 4 people	13%	21%	11%
Yes, 5 or more people	6%	10%	7%
Do you personally know anyone who has ever died from an opioid overdose?			
No	73%	71%	75%
Yes, one person	10%	12%	11%
Yes, 2 to 4 people	12%	12%	9%
Yes, 5 or more people	4%	4%	4%
(If know someone who struggled with prescription painkillers) Who do you know that has struggled with this at any point during the past 3 years? Is it...			
Yourself	***	2%	6%
A family member	***	40%	39%
A close friend	***	37%	35%
An acquaintance	***	59%	50%

Source: DataHaven Community Wellbeing Survey, 2018

*** = question not asked as part of Middletown, CT 2018 DataHaven Community Wellbeing Survey

The key informant survey included a question about the opioid crisis and asked respondents “has the opioid epidemic affected you? Please select all the categories that apply”. **Figures 79a** and **79b** outline the responses for community and hospital.

Figure 79a - Key Informant Survey, “Has the Opioid Epidemic Affected You?”, Community

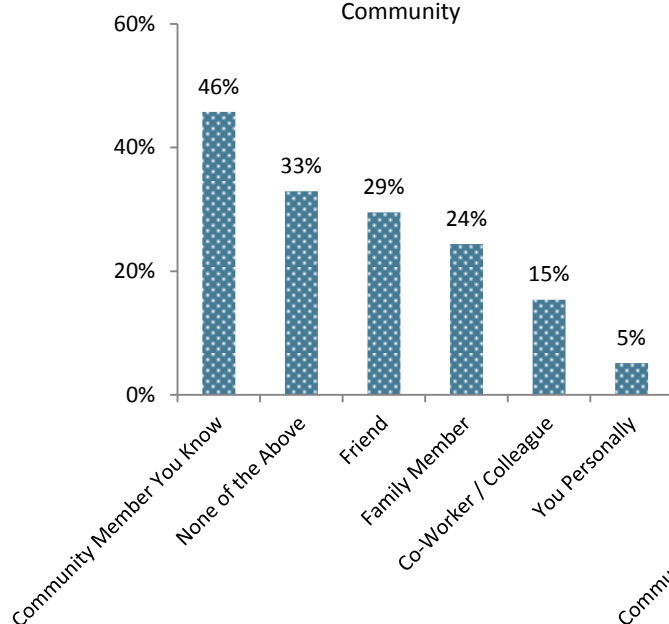


Figure 79b - Key Informant Survey, “Has the Opioid Epidemic Affected You?”, Hospital

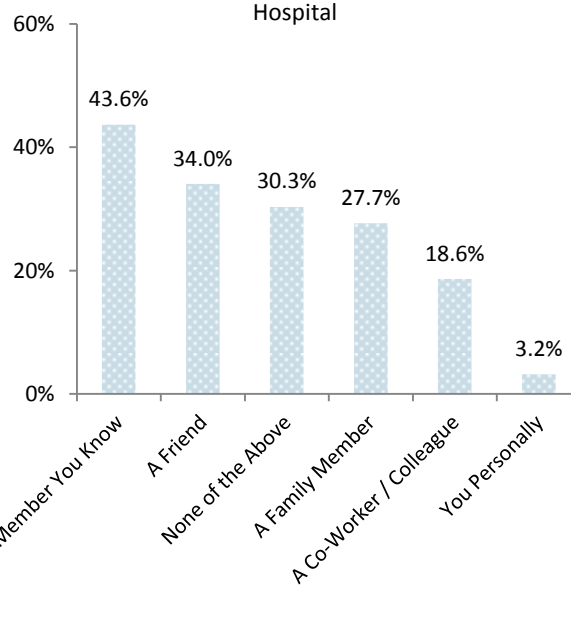


Table 53 gives the accidental drug related deaths for 2016, 2017 and 2018 for all the towns in Middlesex Health’s service area. For each time-period, the majority of accidental drug related deaths in Middlesex Health’s service area were due to “any opioid” (97.4% in 2016; 87.8% in 2017; and 96.2% in 2018).

Table 53 - Accidental Drug Related Deaths, 2016 - 2018

	2016 Any Opioid	2016 Total	2017 Any Opioid	2017 Total	2018 Any Opioid	2018 Total
Chester	1	1	0	0	1	1
Clinton	2	2	3	4	5	5
Colchester	3	3	1	1	4	4
Cromwell	3	3	2	2	2	2
Deep River	2	2	2	2	0	0
Durham	0	0	0	0	1	1
East Haddam	1	1	3	3	1	1
East Hampton	2	2	2	4	2	2
Essex	0	0	1	1	2	2
Haddam	1	1	1	1	1	1
Killingworth	0	0	0	0	0	0
Lyme	0	0	0	0	0	0
Marlborough	2	2	3	3	3	3
Middlefield	1	1	0	0	0	0
Middletown	11	12	21	24	17	18
Old Lyme	0	0	0	0	2	2
Old Saybrook	3	3	1	1	2	2
Portland	4	4	2	2	4	5
Westbrook	2	2	1	1	4	4
Total	38	39	43	49	51	53
% Due to Any Opioid	97.4%		87.8%		96.2%	

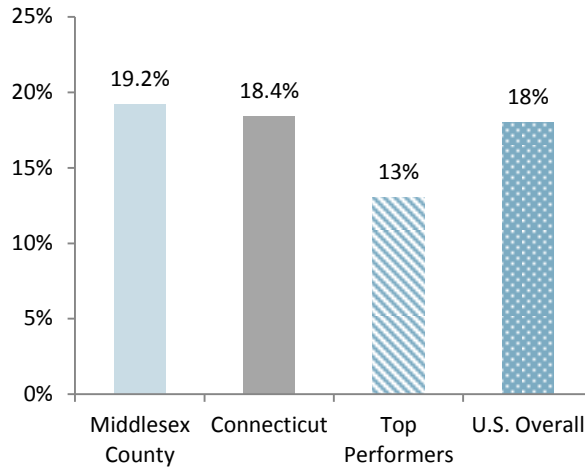
Source: Connecticut Data Collaborative, <http://data.ctdata.org/>

OTHER DRUG USE

Figures 80 and 81 present the percent of excessive drinking (as defined by the percent of adults reporting binge or heavy drinking) and the percent of adults who are current smokers for Middlesex County, benchmarked against Connecticut, top performers and the U.S. overall. The County Health Rankings & Roadmaps top performers are those counties that are ranked as being in the top 10%, either in the 90th percentile or the 10th percentile, depending on whether the measure is framed positively or negatively (County Health Rankings & Roadmaps, 2019).

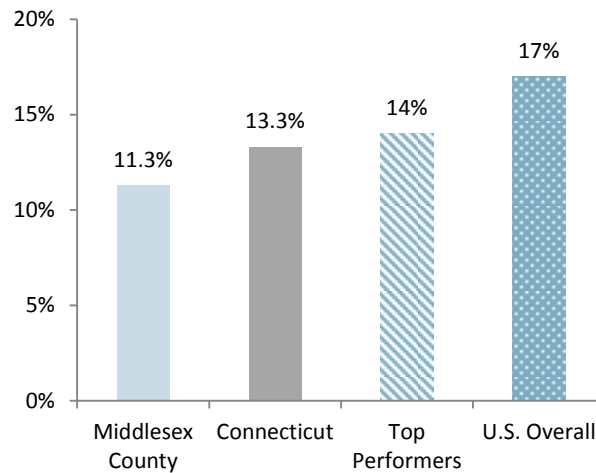
For the excessive drinking measure, Middlesex County has a higher percentage compared to all three benchmarks, whereas for the current smokers measure, Middlesex County has a lower percentage when compared to the three benchmarks.

Figure 80 - Percent of Adults Reporting Excessive Drinking



Source: County Health Rankings & Roadmaps 2019
Original data source: Behavioral Risk Factor Surveillance System (2016)

Figure 81 - Percent of Adults Who Are Current Smokers



Source: County Health Rankings & Roadmaps 2019
Original data source: Behavioral Risk Factor Surveillance System (2016)

The 2018 DataHaven Community Wellbeing Survey asked respondents about use of cigarettes, vapor/vape pens/electronic cigarettes, alcohol, and marijuana/cannabis (**Table 54**). Of those responding that they have ever used a vapor/vape pen/electronic cigarette, a higher percentage in Middletown (50%) reported “yes” to a range of usage (one to five days; six to twenty-nine days; everyday) within the past 30 days compared to 26% in Middlesex County and 40% in Connecticut, although the everyday usage was less in Middletown when compared to the county and state.

Table 54 - Cigarette, Vapor/Vape Pens/E-Cigarettes, Alcohol, Marijuana/Cannabis Use

	Middletown	Middlesex County	Connecticut
Have you smoked at least 100 cigarettes in your entire life?			
Yes	39%	38%	39%
No	61%	62%	61%
(If smoked at least 100 cigarettes) Do you currently smoke cigarettes every day, some days or not at all?			
Every day	33%	27%	25%
Some days	10%	6%	10%
Not at all	57%	68%	64%
Have you ever tried using vapor or vape pens, electronic cigarettes or E-cigarettes, even just one time in your entire life?			
Yes	18%	17%	19%
No	82%	82%	81%
(If used vapor or vape pens, electronic cigarettes or E-cigarettes) During the past 30 days, on how many days did you use these?			
None	47%	73%	57%
One to five	34%	11%	19%
Six to twenty-nine	13%	4%	9%
Everyday	3%	11%	12%
Considering all types of alcoholic beverages, how many times during the past 30 days did you have <5 for men <4 for women drinks on an occasion?			
None	76%	76%	71%
One to five	16%	16%	22%
Six to ten	2%	2%	3%
More than ten	5%	5%	3%
During the past 30 days, on how many days did you use marijuana or cannabis?			
None	82%	84%	87%
One to five	8%	5%	5%
Six to ten	0%	4%	1%
More than ten	10%	7%	6%

Source: DataHaven Community Wellbeing Survey, 2018

The key informant survey respondents were asked to rate the degree to which they believed a variety of issues influence the health and well-being status of the community using a Likert scale of 1 - 5 with 1 = limited influence on community health and well-being; 3 = moderate influence on community health and well-being; and 5 = significant influence on community health and well-being.

Tobacco use was defined as “cigarettes, cigars, chewing tobacco, etc.”. Prescription opioid misuse was defined as “oxycodone/OxyContin®, hydrocodone/Vicodin®, fentanyl, codeine, morphine”. Other Illicit drug use was defined as “hallucinogens, inhalants, methamphetamine, etc.”. Benzodiazepine misuse / abuse was defined as “Ativan, Klonopin, Valium, Xanax, etc.”. Other prescription drug misuse / abuse was defined as “barbiturates, tranquilizers, stimulants, sedatives, etc.”.

Figure 82 presents the top three community and hospital responses for significant influence on community health and well-being and **Table 55** provides the ranking of significant influence on community health and well-being for all 12 response options by community and hospital.

Figure 82 - Key Informant Survey, Top 3 Significant Influence on Community Health and Well-Being

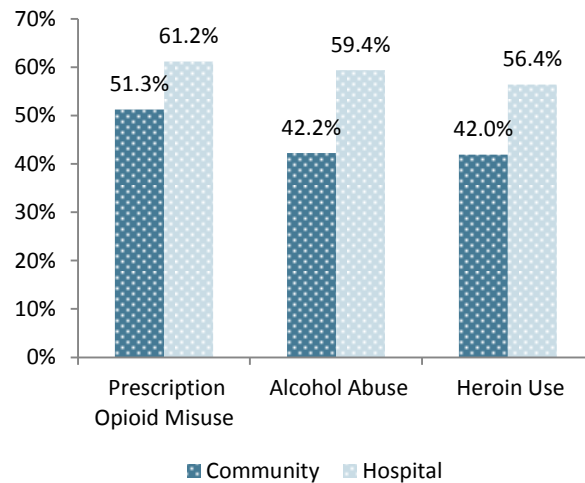


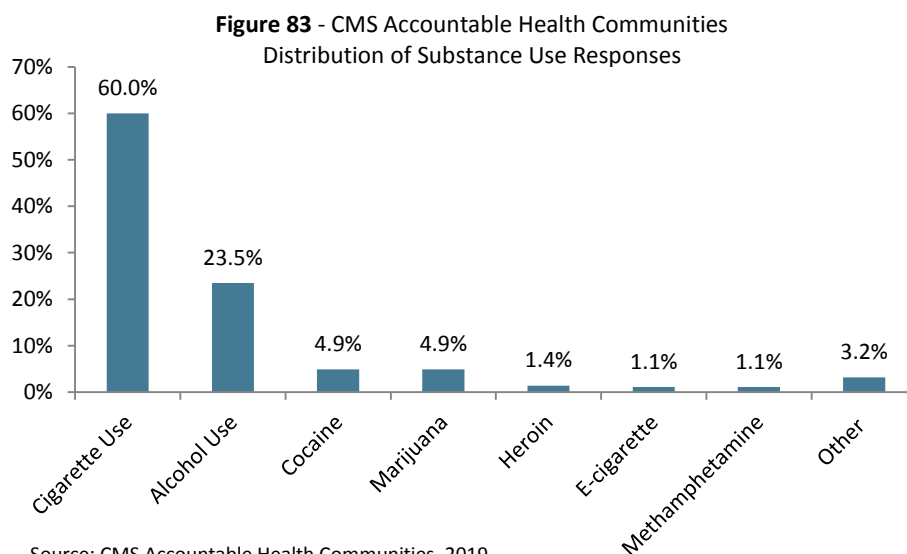
Table 55 - Key Informant Survey, Significant Influence on Community Health and Well-Being

Community Respondents		Hospital Respondents	
Indicators	% of Respondents	Indicators	% of Respondents
Prescription Opioid Misuse	51.3%	Prescription Opioid Misuse	61.2%
Alcohol Abuse	42.2%	Alcohol Abuse	59.4%
Heroin Use	42.0%	Heroin Use	56.4%
Lack of physical activity / Fitness	40.0%	Tobacco Use	46.8%
Poor Diet / Nutrition	39.6%	Cocaine Use	42.6%
E-cigarettes / Vaping Use	34.3%	Other Illicit Drug Use	42.0%
Cocaine use	33.1%	Poor Diet / Nutrition	41.9%
Other Illicit Drug Use	32.5%	Lack of Physical Activity / Fitness	41.7%
Tobacco use	32.2%	E-cigarettes / Vaping Use	40.4%
Benzodiazepine Misuse / Abuse	30.2%	Benzodiazepine Misuse / Abuse	39.6%
Other Prescription Drug Misuse / Abuse	27.7%	Other Prescription Drug Misuse / Abuse	35.8%
Non-Medical Marijuana Use	16.2%	Non-Medical Marijuana Use	25.3%

CMS ACCOUNTABLE HEALTH COMMUNITIES INITIATIVE – SUBSTANCE USE

In addition to screening for the five core health-related social needs (housing instability; utility needs; food insecurity; interpersonal violence; transportation) through the Centers for Medicare & Medicaid Services Accountable Health Communities project, grant sites were given the option of selecting supplemental screening questions. For the CT CAPS collaborative, substance abuse was chosen as a supplemental screen, and Middlesex Health added the additional question sub-set to its screening process in the Middletown emergency department. The substance abuse questions target alcohol, tobacco and other drugs and were asked within the context of “*how many times in the past 12 months have you used...*”, with frequency options provided (never; once or twice; monthly; weekly; daily or almost daily). Alcohol usage is defined as “5 or more drinks in a day for males and 4 or more drinks in a day for females”, with one drink defined as “12 ounces of beer, 5 ounces of wine, or 1.5 ounces of 80 proof spirits”. Tobacco products are defined as “cigarettes, cigars, snuff, chew, and electronic cigarettes”. The screen also includes use of prescription drugs for non-medical reasons and illicit/illegal drug use with the qualifier that the question is only being asked in order to identify community services that may be available to help.

Within the first year (August 2018 – August 2019) of screening for the project in the Middletown emergency department, when adding substance abuse responses to the five core health-related social need responses, 33.6% screened positive for substance abuse/use. **Figure 83** presents the distribution of responses for a sub-sample of the total positive substance use screens in the categories defined above (note: here, the term “use” is used rather than “abuse” as not all respondents can be categorized as dependent). Overall, the responses for the categories other than cigarette use and drinking patterns are lower than expected which may be due to 1) the most acute substance users not being screened due to an unstable state, and 2) under-reporting due to the nature of the in-person data collection methodology where people may not feel comfortable disclosing illicit/illegal drug use, compared to surveys administered telephonically and anonymously.

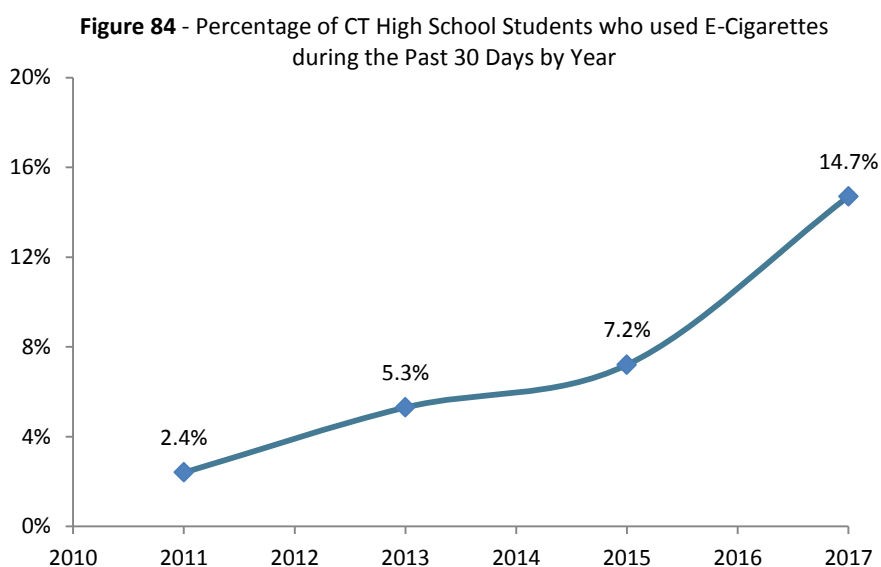


Source: CMS Accountable Health Communities, 2019
Middlesex Health Middletown Emergency Department Screens, sub-sample time-frame of 8.10.18 – 6.13.19
Values based on total screens conducted
Cigarette Use = daily (57.5%) + weekly (2.5%)
Alcohol Use = 5+ drinks day/almost daily (19.3%) + 5+ drinks weekly (4.2%)

YOUTH SURVEY DATA

The Connecticut School Health Survey (CSHS) is a school-based survey of students in grades 9 – 12 in regular public, charter, magnet, or vocational schools. There are two sections to the survey, the Youth Behavior Component (YBC) and the Youth Tobacco Component (YTC). The surveys are administered in randomly chosen classrooms within selected schools and are voluntary, anonymous and confidential (CT DPH, 2019). All results are weighted. While the data are presented for the state as a whole and not by region, we can use the results to make inferences and draw conclusions regarding prevalence within our own communities and to raise awareness regarding important issues among local youth. Both the YBC and the YTC ask extensive questions, only a selection of which are included here. The full reports can be accessed at <https://portal.ct.gov/DPH/Health-Information-Systems--Reporting/Hisrhome/Connecticut-School-Health-Survey>.

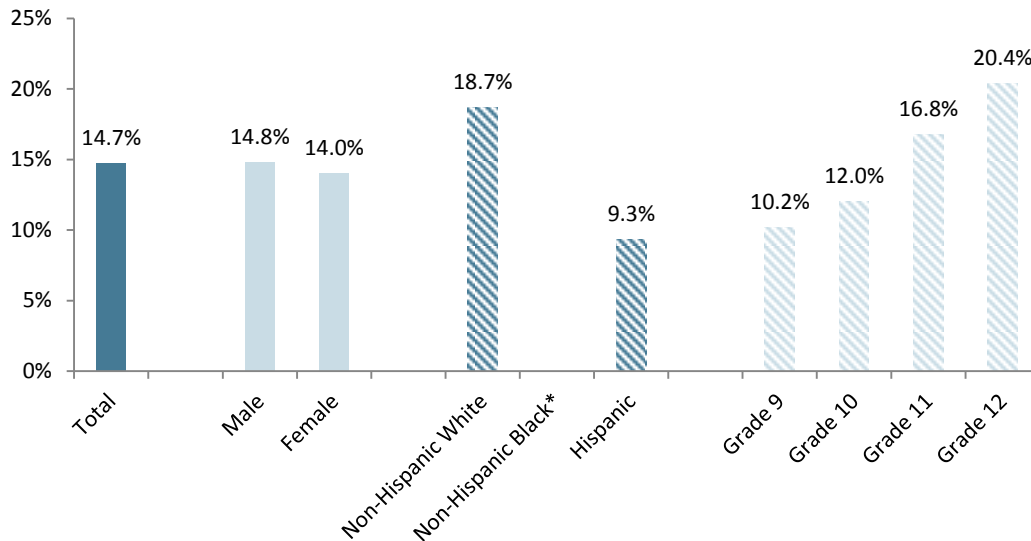
The Youth Tobacco Component (YTC) has been administered biennially in Connecticut since 2000. The 2017 Connecticut YTC was made up of 75 questions with the core questions developed by the CDC, and supplemental questions added by the CT Department of Public Health (DPH). Of particular concern is the rise in electronic cigarette and vaping device use among CT youth, which continues to increase at an alarming rate. Between 2011 and 2017, the percentage of high school students who are current e-cigarette users (defined as “used on one or more occasion in the past 30 days”) increased 6-fold from 2.4% to 14.7%. Between 2015 and 2017, the increase from 7.2% to 14.7% was statistically significant (**Figure 84**). Overall, current use among high school students was 14.7%, with usage increasing with age from 11.1% among those 15 years-old and younger to 20.8% among students 18 years-old and older (CT YTC, 2017). This trend is especially concerning as studies indicate that e-cigarette/vaping use by teens increases their risk of using combustible tobacco products (cigarettes, cigars, or any tobacco product designed to be smoked) as youths and young adults (NASEM, 2018; Bold, 2018). Of additional concern is that more than half of e-cigarette users (50.6%) had used their vaping devices for substances other than nicotine, such as marijuana, THC or hash oil, or THC wax (CT YTC, 2017).



Source: Connecticut Youth Tobacco Survey Results; 2017 Surveillance Report. Hartford, CT: Connecticut Department of Public Health

Additional findings for current e-cigarette use include: 1) usage does not vary significantly by sex; 2) there is a significantly higher use among Non-Hispanic White students (18.7%) when compared to Hispanic students (9.3%), and 3) there is significantly higher use in grades 11 (16.8%) and 12 (20.4%) when compared to grades 9 (10.2%) and 10 (12.0%); (CT YTC, 2017), **Figure 85**.

Figure 85 - Percentage of CT High School Students who used E-Cigarettes on 1 or more of the Past 30 Days, 2017



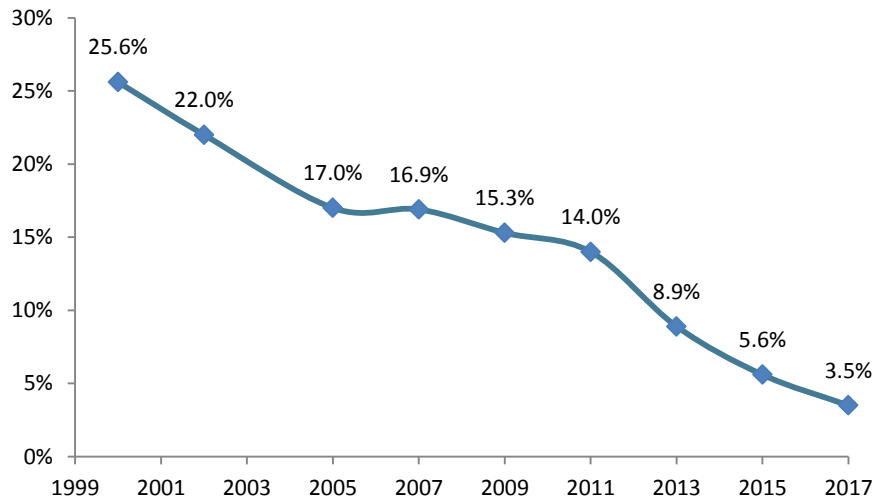
Source: Connecticut Youth Tobacco Survey Results; 2017 Surveillance Report. Hartford, CT: Connecticut Department of Public Health

* Estimates based on unweighted cases fewer than 50 or with a relative standard error greater than 30% are not presented

For current cigarette smoking (defined as “used on one or more occasion in the past 30 days”) 3.5% of Connecticut high school students reported being current cigarette smokers. Findings include the following: 1) usage does not vary significantly by sex or grade, and 2) among current cigarette smokers, 15.7% smoked on 20 or more of the past 30 days (i.e., frequent cigarette smoking), while the majority (63.5%) smoked on 1 to 5 days within the past 30 days.

Between 2000 and 2017, there was a significant decrease in the percentage of high school students who smoked cigarettes on one or more occasion in the past 30 days (25.6% to 3.5%). Between 2015 and 2017, the decrease from 5.6% to 3.5% was not statistically significant (CT YTC, 2017), **Figure 86**.

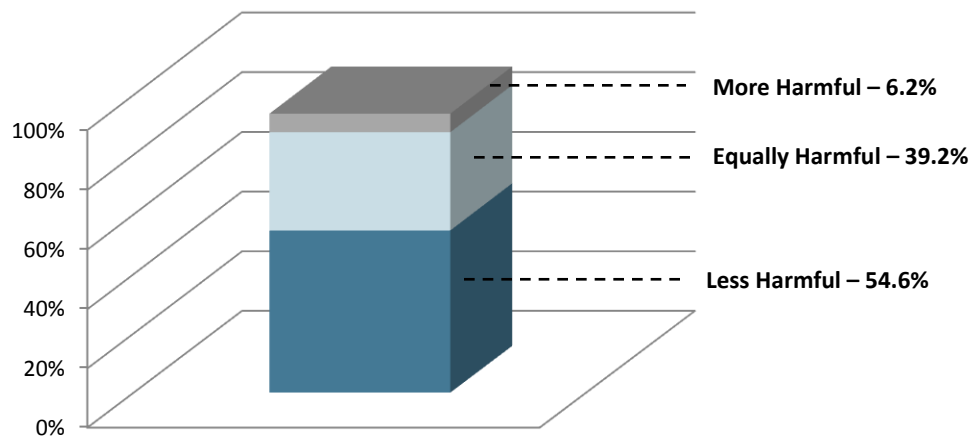
Figure 86 - Percentage of CT High School Students who Smoked Cigarettes during the Past 30 Days by Year



Source: Connecticut Youth Tobacco Survey Results; 2017 Surveillance Report. Hartford, CT: Connecticut Department of Public Health

The 2017 Youth Tobacco Survey finds that the overall percentage of Connecticut high schools students who currently use some form of tobacco is 17.9% with the vast majority using flavored tobacco products. Among Connecticut high school students who have ever tried any tobacco product, 50% tried e-cigarettes first, 24% tried cigarettes first, and 13% tried cigars first. In measuring beliefs about addiction of other tobacco products when compared to regular cigarettes, 24% believed hookahs are less addictive than regular cigarettes; 30% believed cigars are less addictive than regular cigarettes; and nearly 40% (39.7%) considered e-cigarettes less addictive than regular cigarettes. When measuring beliefs about the health dangers of tobacco products, 22.8% of the students believed cigars are less harmful than regular cigarettes and approximately 55% (54.6%) thought e-cigarettes are less dangerous than regular cigarettes (CT YTC, 2017), **Figure 87**.

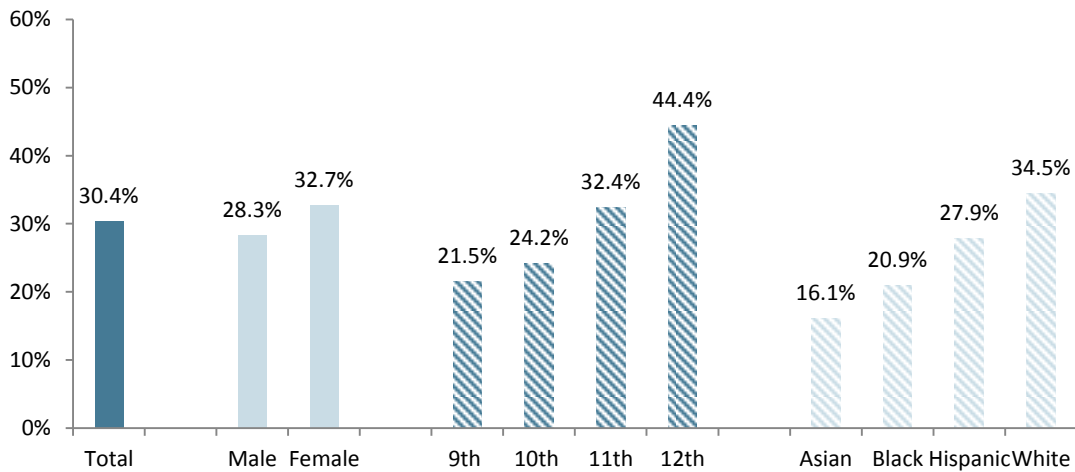
Figure 87 - Students' Beliefs about the Dangers of E-Cigarettes Compared to Regular Cigarettes, 2017



Source: Connecticut Youth Tobacco Survey Results; 2017 Surveillance Report. Hartford, CT: Connecticut Department of Public Health

The Youth Behavior Component (YBC) survey was first administered in Connecticut in 1997 and has been administered biennially in Connecticut since 2005. Nationally it is known as the Youth Risk Behavior Survey (YRBS). The purpose of the survey is to compare the prevalence of health-risk behaviors among subpopulations of high school students; assess trends in health-risk behaviors over time; and assist in developing and evaluating school and community policies, programs, and practices designed to decrease health-risk behaviors and improve health and educational outcomes among youth (CT YBC, 2015). The Connecticut YBC is made up of approximately 99 questions developed by the CDC, the CT Department of Public Health (DPH), and the Connecticut State Department of Education (CSDE). **Figure 88** outlines the percentage of Connecticut high school students who currently drank alcohol, defined as “at least one drink of alcohol, on at least 1 day during the 30 days before the survey” and **Figure 89** gives the trend of Connecticut high school student drinking patterns from 1997 – 2017.

Figure 88 - Percentage of CT High School Students who Currently Drank Alcohol*, 2017

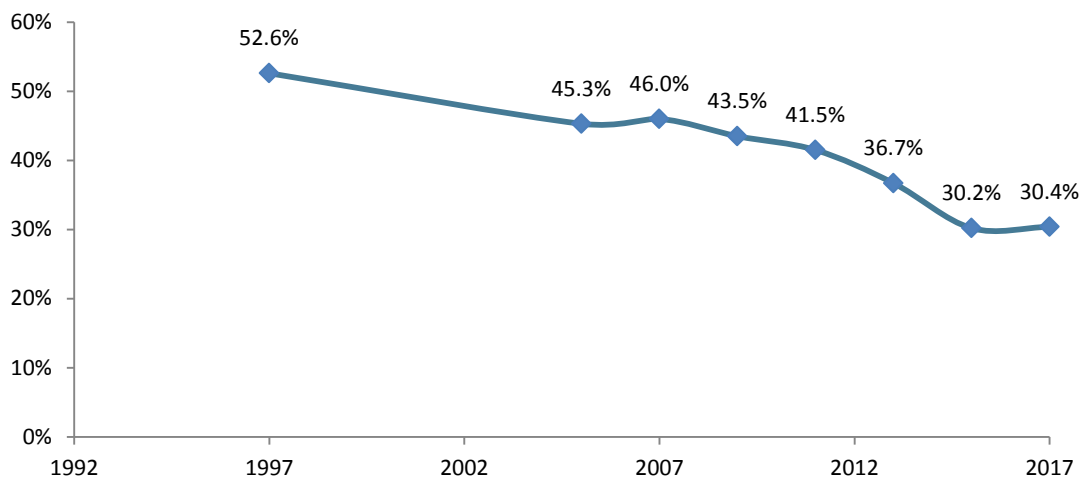


Source: 2017 Connecticut School Health Survey, Youth Behavior Component

* At least one drink of alcohol, on at least 1 day during the 30 days before the survey

All Hispanic students are included in the Hispanic category. All other races are non-Hispanic

Figure 89 - Percentage of CT High School Students who Currently Drank Alcohol*, 1997 - 2017



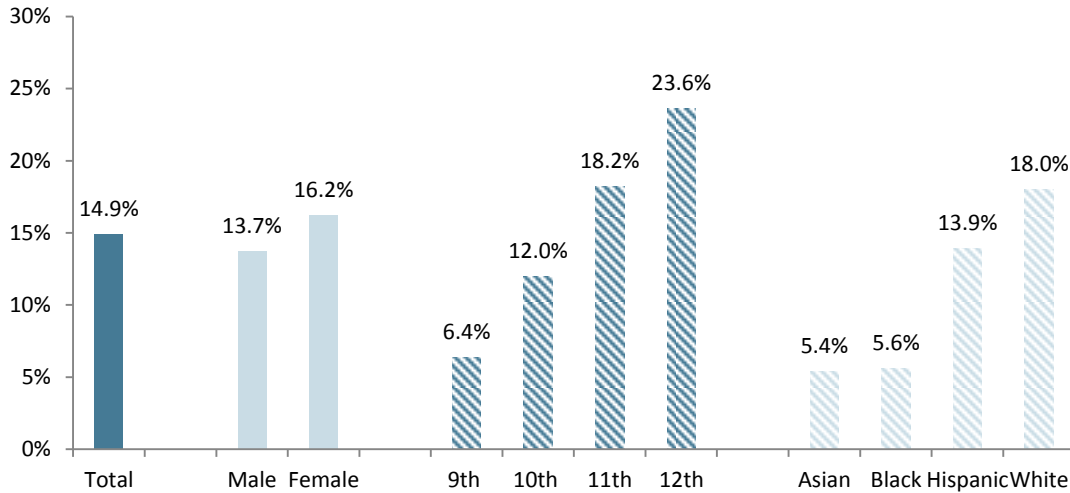
Source: 2017 Connecticut School Health Survey, Youth Behavior Component

* At least one drink of alcohol, on at least 1 day during the 30 days before the survey

No data available for 1999, 2001, 2003

Figure 90 gives the percentage of Connecticut high school students who currently were binge drinking, defined as “had four or more drinks of alcohol in a row for female students or five or more drinks of alcohol in a row for male students, within a couple of hours, on at least 1 day during the 30 days before the survey”.

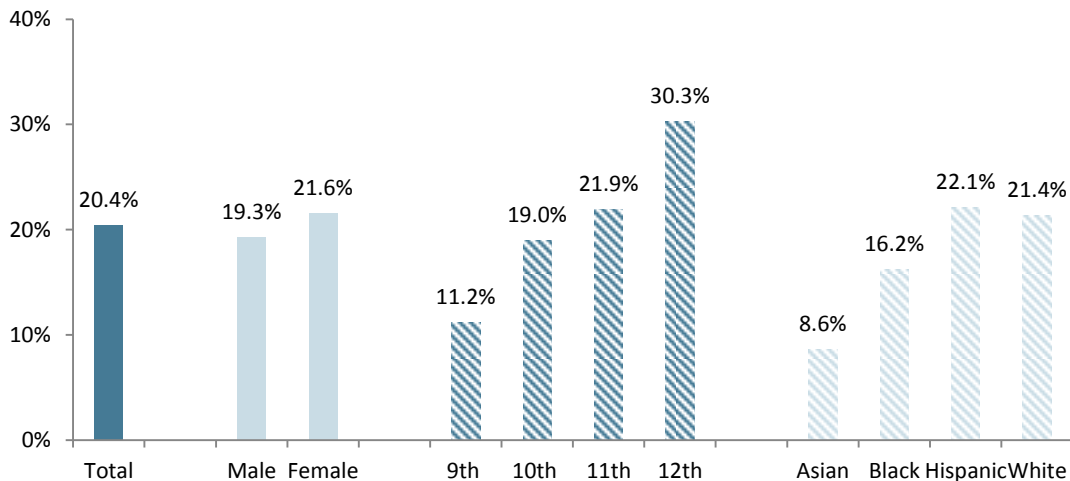
Figure 90 - Percentage of CT High School Students who Currently were Binge Drinking*, 2017



Source: 2017 Connecticut School Health Survey, Youth Behavior Component
 * Had four or more drinks of alcohol in a row for female students or five or more drinks of alcohol in a row for male students, within a couple of hours, on at least 1 day during the 30 days before the survey
 All Hispanic students are included in the Hispanic category. All other races are non-Hispanic

Figure 91 outlines the percentage of Connecticut high school students who currently used marijuana, defined as “one or more times during the 30 days before the survey”.

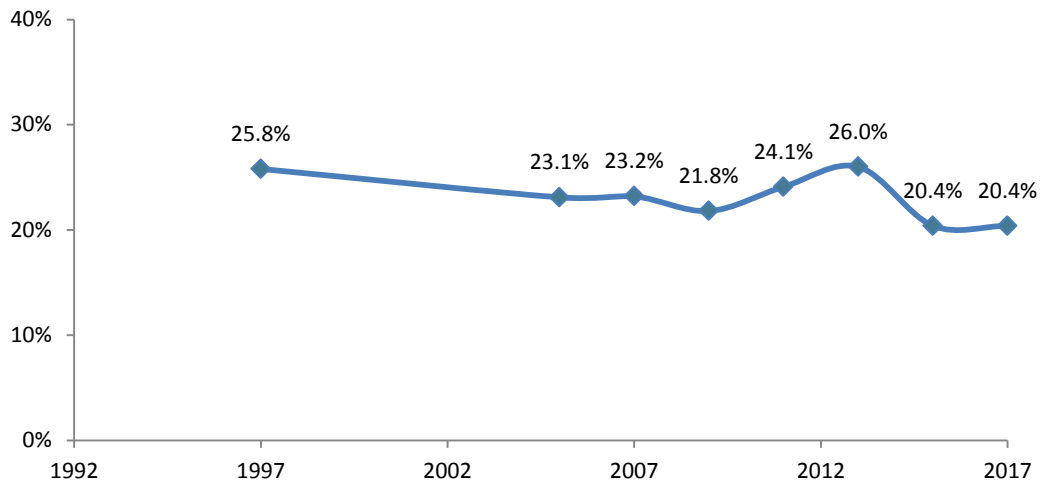
Figure 91 - Percentage of CT High School Students who Currently used Marijuana*, 2017



Source: 2017 Connecticut School Health Survey, Youth Behavior Component
 * One or more times during the 30 days before the survey
 All Hispanic students are included in the Hispanic category. All other races are non-Hispanic

Figure 92 presents the trend of percentage of Connecticut high school students who currently used marijuana (defined as “one or more times during the 30 days before the survey”) from 1997 – 2017.

Figure 92 - Percentage of CT High School Students who Currently Used Marijuana, 1997 - 2017



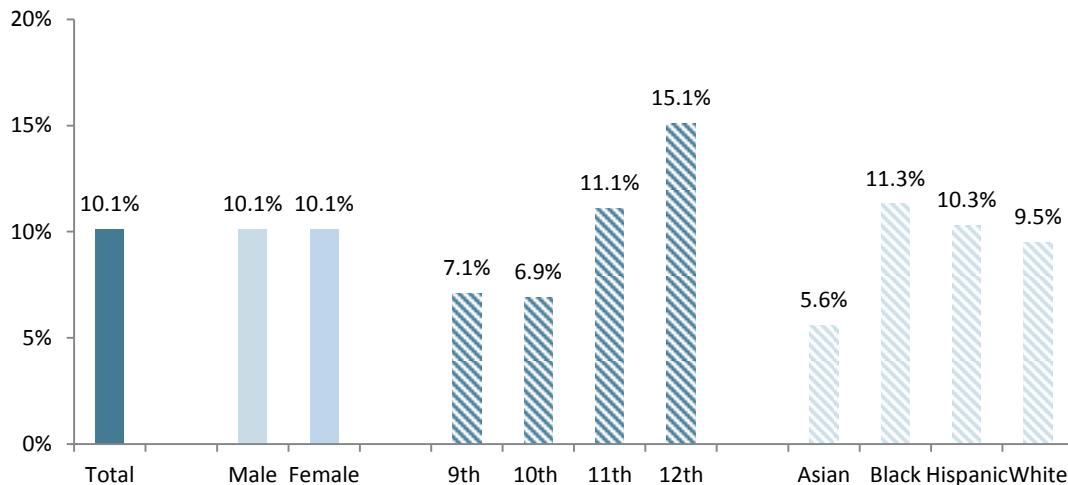
Source: 2017 Connecticut School Health Survey, Youth Behavior Component

* One or more times during the 30 days before the survey

No data available for 1999, 2001, 2003

The Youth Behavior Component survey asked Connecticut high school students about experience with prescription pain medicine, specifically asking if students ever took prescription pain medicine without a doctor’s prescription or differently than how a doctor told them to use it, giving the qualifier, “counting drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet, one or more times during their life” (**Figure 93**).

Figure 93 - Percentage of CT High School Students who ever took Prescription Pain Medicine without a Doctor’s Prescription or Differently than how a Doctor Told Them to Use it*, 2017



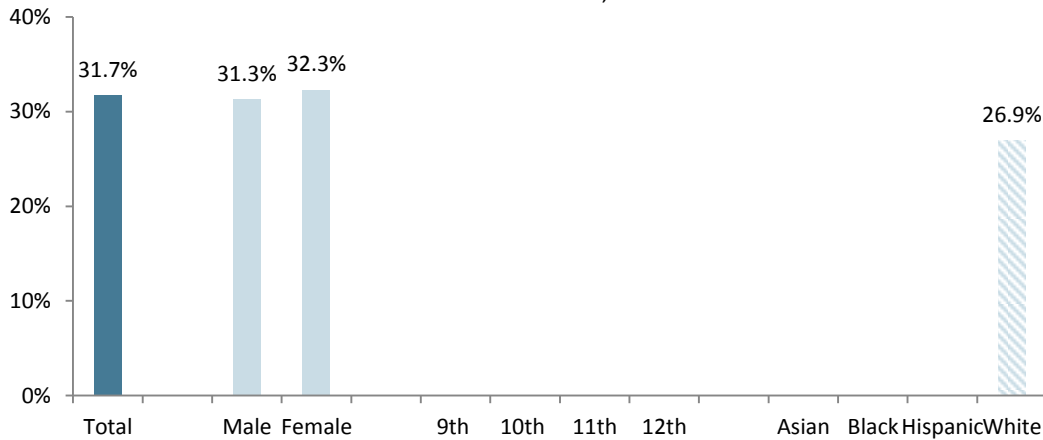
Source: 2017 Connecticut School Health Survey, Youth Behavior Component

* Counting drugs such as codeine, Vicodin, OxyContin, Hydrocodone, and Percocet, one or more times during their life

All Hispanic students are included in the Hispanic category. All other races are non-Hispanic

Figure 94 outlines the percentage of CT high school students who obtained a prescription pain medicine by someone giving it to them or by taking it from their home or someone else’s home the last time they took prescription pain medicine without a doctor’s prescription or differently than how a doctor told them.

Figure 94 - Percentage of CT High School Students Who Obtained Prescription Pain Medicine by Someone Giving It to Them or by Taking It from Their Home or Someone Else’s Home the Last Time They Took Prescription Pain Medicine Without a Doctor’s Prescription or Differently Than How a Doctor Told Them*, 2017



Source: 2017 Connecticut School Health Survey, Youth Behavior Component

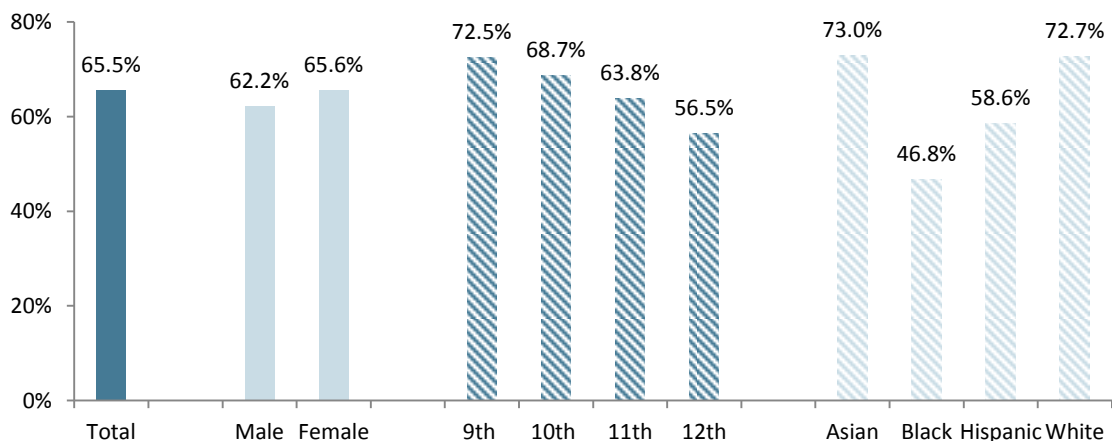
* Among students who had ever taken prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it

All Hispanic students are included in the Hispanic category. All other races are non-Hispanic

Missing bar indicates fewer than 100 students in this subgroup

Students were asked if they ate at least one meal with their family on three or more days during the seven days before the survey (**Figure 95**). There are many benefits to the “family table” including protecting adolescents from negative, high-risk behaviors. The protective factors of the family meal stem from the attributes that come from the experience: the feelings of connectedness, security and structure; listening; communication; sharing values and ideas; and, problem solving (Anderson, 2014).

Figure 95 - Percentage of High School Students Who Ate at Least One Meal with Their Family*, 2017



Source: 2017 Connecticut School Health Survey, Youth Behavior Component

* On three or more days during the 7 days before the survey

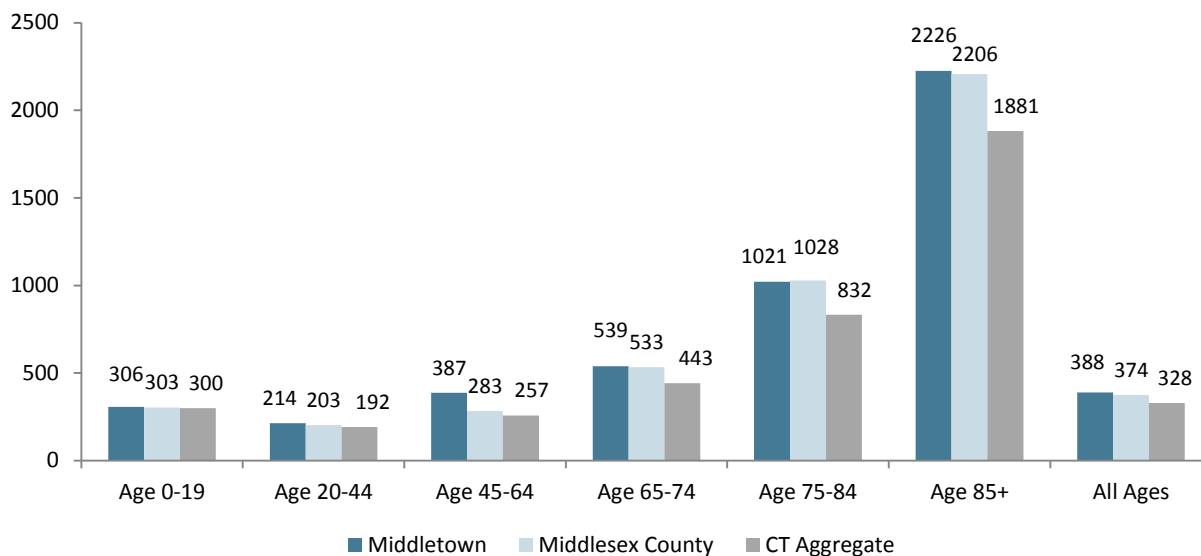
All Hispanic students are included in the Hispanic category. All other races are non-Hispanic

INJURIES – CHIMEDATA STUDY

This section reviews the injury indicator encounter rates from the DataHaven ChimeData study for Middletown, Middlesex County and Connecticut for the 2015-2017 time frame.

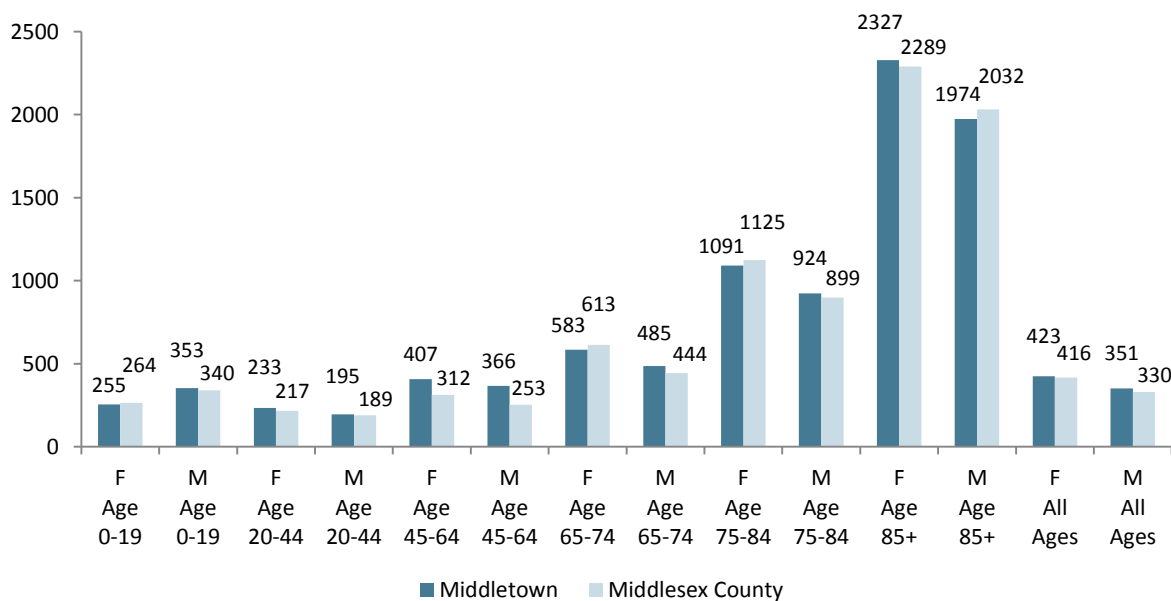
FALLS

Figure 96 - Falls, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

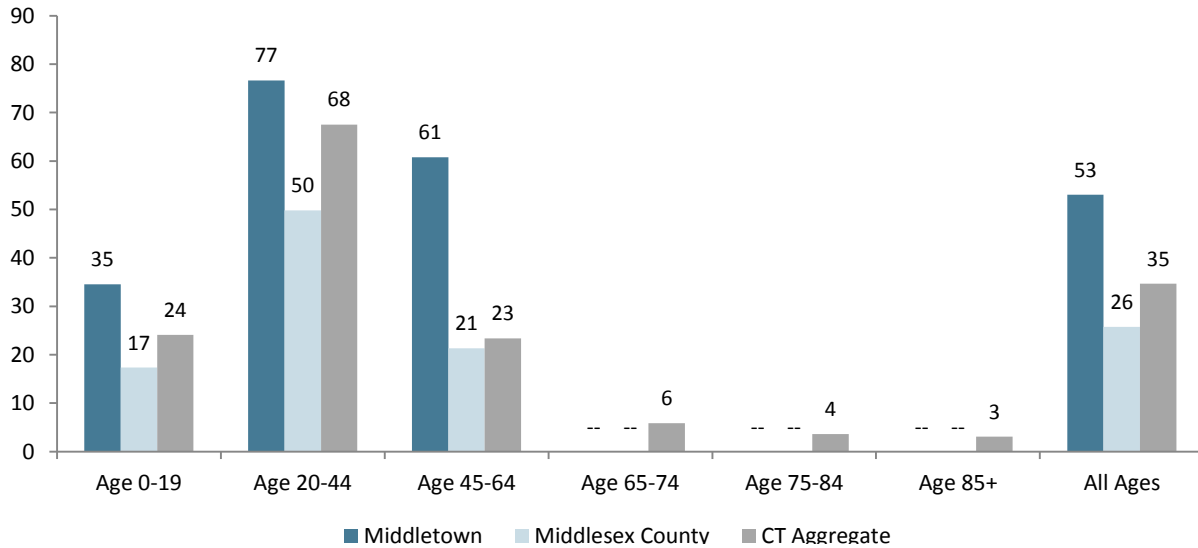
Figure 97 - Falls, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

HOMICIDE & ASSAULT

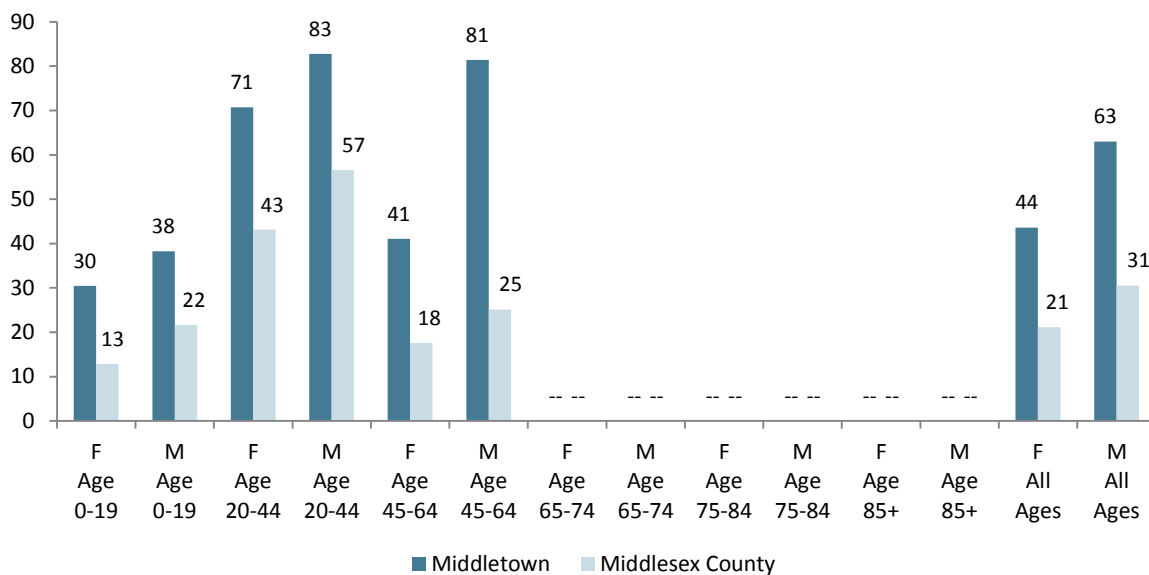
Figure 98 - Homicide & Assault, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

Figure 99 - Homicide & Assault, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017

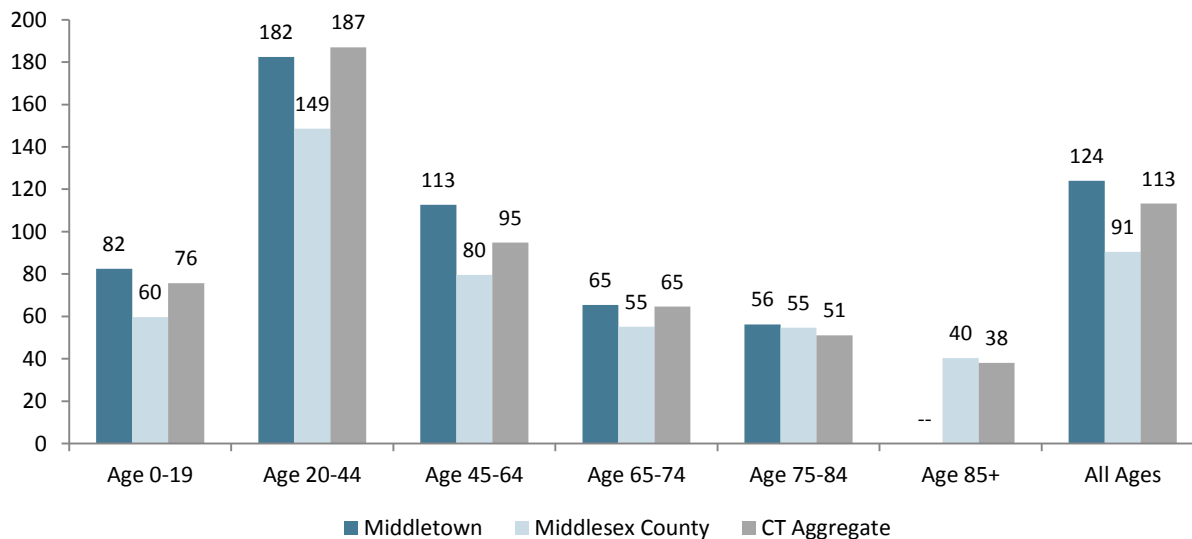


Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

MOTOR VEHICLE ACCIDENTS

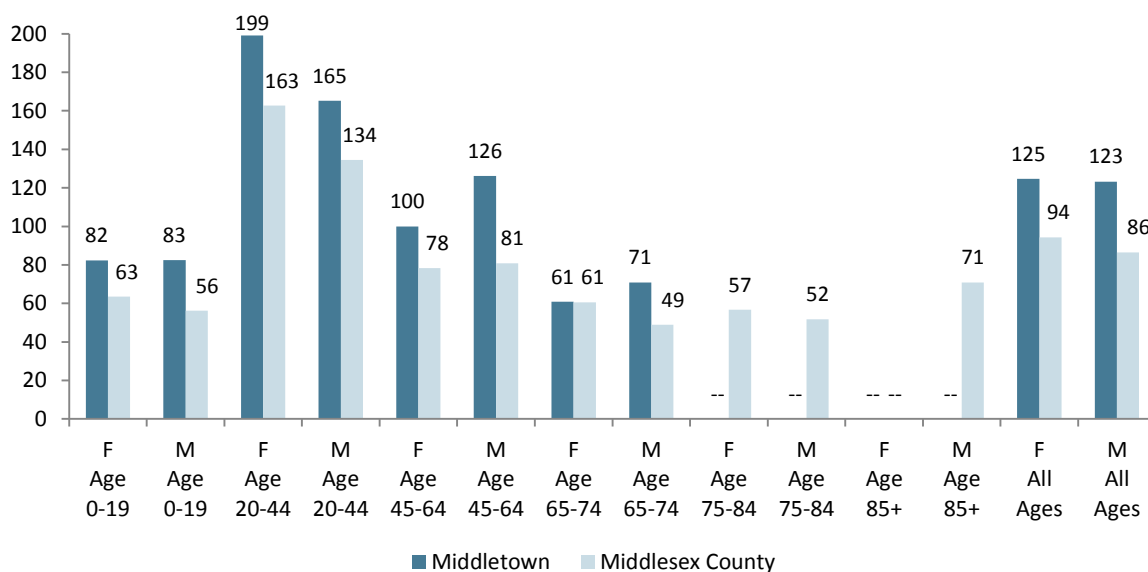
Figure 100 - Motor Vehicle Accidents, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

Figure 101 - Motor Vehicle Accidents, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017

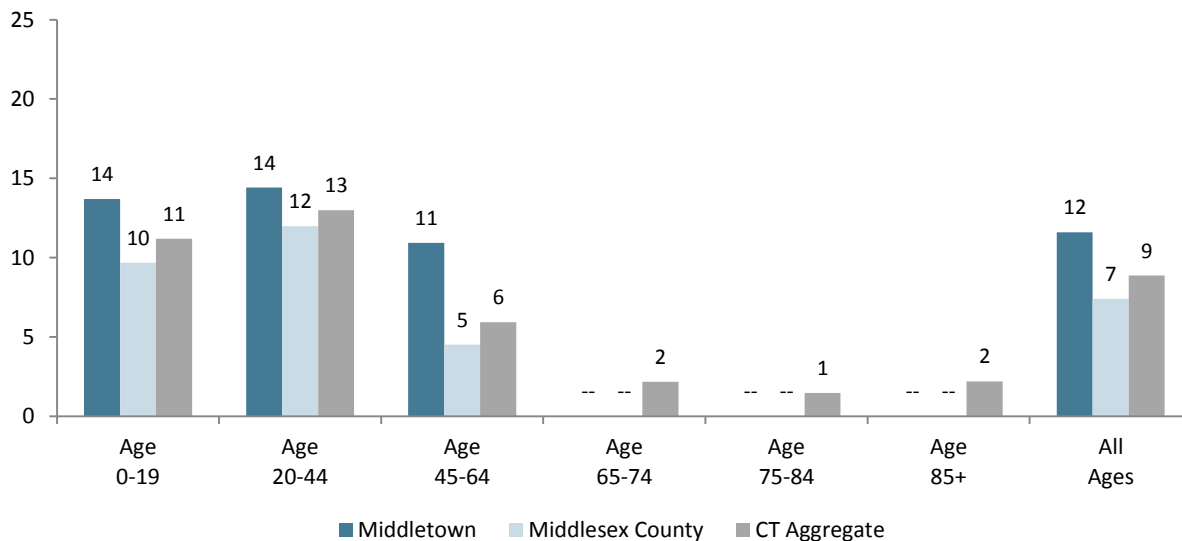


Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

SUICIDE & SELF HARM

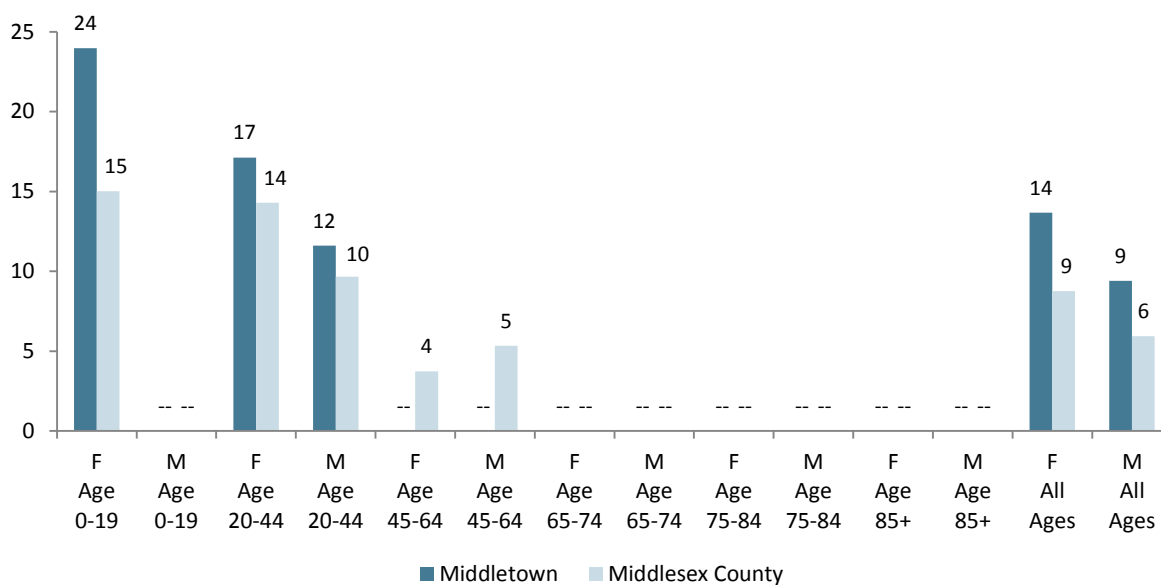
Figure 102 - Suicide & Self Harm, Annualized Encounter Rates per 10,000 Residents by Age, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

Figure 103 - Suicide & Self Harm, Annualized Encounter Rates per 10,000 Residents by Age and Gender, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

Note: data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

VISION FOR A HEALTHY COMMUNITY

Key informant survey community and hospital respondents were asked, “what is your vision for a healthy community and what is needed to get to that vision?”



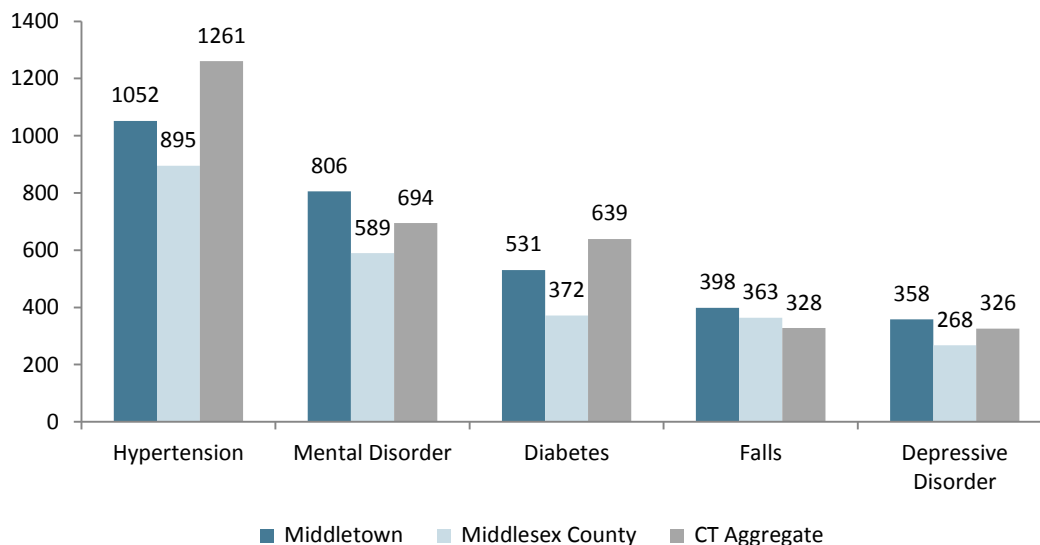
VISION FOR A HEALTHY COMMUNITY *continued*



RANKED INDICATORS – CHIMEDATA STUDY

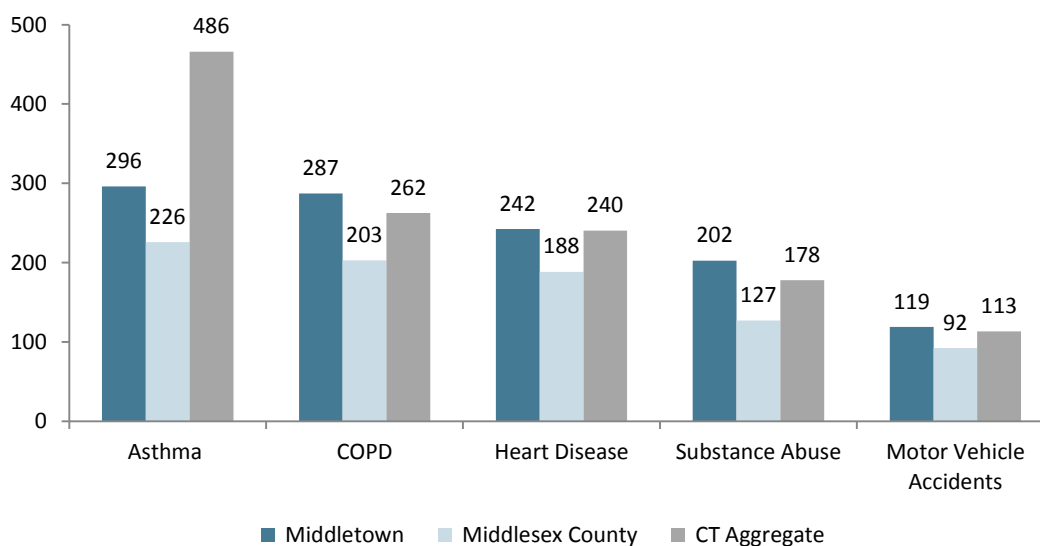
Figures 104, 105 and 106 rank the frequency of the 16 indicators from the DataHaven ChimeData Study, by Middletown, Middlesex County and Connecticut for the 2015-2017 time frame by most common to less common.

Figure 104 - Indicator Frequency, Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

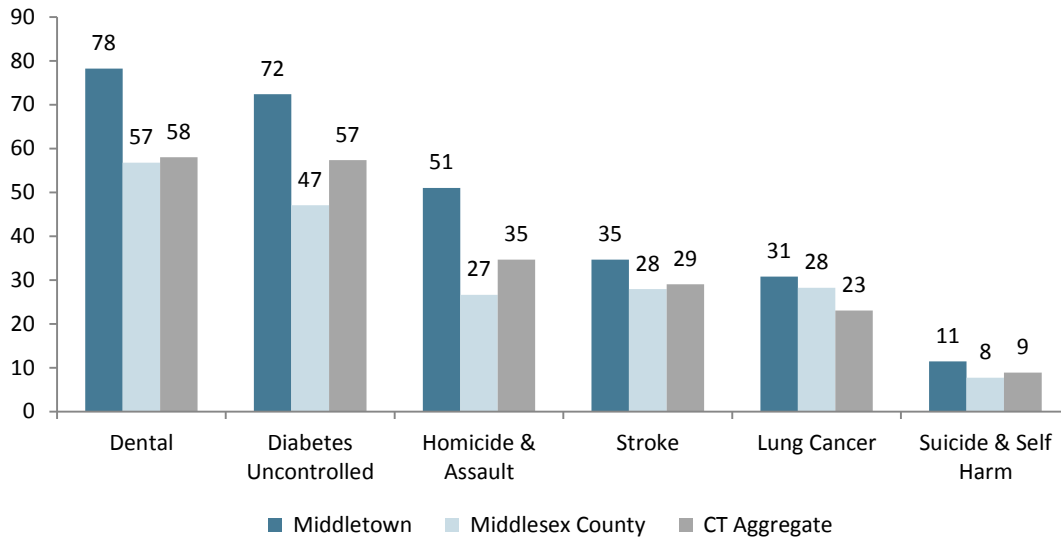
Figure 105 - Indicator Frequency, Annualized Age-Adjusted Encounter Rates (Except Asthma*) per 10,000 Residents, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

* For asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators

Figure 106 - Indicator Frequency, Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

RANKED INDICATORS – CHIMEDATA STUDY, ALL TOWNS

Tables 56a, 56b, 57a and 57b rank the frequency of the 16 indicators from the DataHaven ChimeData Study by town in Middlesex Health’s service area, Middlesex County and Connecticut for the 2015-2017 time frame, from more common to less common.

Table 56a - More Common Indicators, Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2015-2017

Towns/ County/State	1	2	3	4	5	6	7	8
Chester	Hypertension (685)	Mental Disorder (545)	Falls (345)	Diabetes (254)	Depressive Disorder (221)	Asthma (184)	COPD (157)	Heart Disease (126)
Clinton	Hypertension (1019)	Mental Disorder (604)	Falls (433)	Diabetes (404)	Asthma (259)	Depressive Disorder (254)	COPD (224)	Heart Disease (223)
Colchester	Hypertension (1165)	Mental Disorder (750)	Diabetes (527)	Falls (378)	Depressive Disorder (366)	Asthma (340)	COPD (296)	Heart Disease (261)
Cromwell	Hypertension (845)	Mental Disorder (551)	Diabetes (395)	Falls (276)	Depressive Disorder (269)	Heart Disease (194)	Asthma (189)	COPD (180)
Deep River	Hypertension (936)	Mental Disorder (542)	Falls (401)	Diabetes (283)	Depressive Disorder (259)	COPD (211)	Heart Disease (156)	Asthma (151)
Durham	Hypertension (740)	Mental Disorder (368)	Diabetes (271)	Falls (253)	Depressive Disorder (189)	Asthma (166)	Heart Disease (142)	COPD (140)
East Haddam	Hypertension (784)	Mental Disorder (421)	Falls (320)	Diabetes (271)	Depressive Disorder (215)	Asthma (183)	COPD (152)	Heart Disease (125)
East Hampton	Hypertension (1010)	Mental Disorder (575)	Falls (435)	Diabetes (419)	Depressive Disorder (279)	COPD (247)	Asthma (218)	Heart Disease (209)
Essex	Hypertension (727)	Mental Disorder (460)	Falls (330)	Diabetes (208)	Depressive Disorder (202)	Asthma (180)	COPD (138)	Heart Disease (128)
Haddam	Hypertension (737)	Mental Disorder (483)	Falls (339)	Diabetes (290)	Depressive Disorder (228)	Heart Disease (189)	COPD (171)	Asthma (168)
Killingworth	Hypertension (764)	Mental Disorder (409)	Falls (299)	Diabetes (278)	Asthma (200)	Depressive Disorder (189)	Heart Disease (162)	COPD (152)
Lyme	Hypertension (91)	Mental Disorder (43)	Heart Disease (23)	Falls (23)	Diabetes (22)	Depressive Disorder (17)	COPD (17)	Motor Vehicle Accidents (7)

Source: DataHaven Analysis of CHA CHIME data, 2019

Note: for asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators

Table 56b - More Common Indicators, Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2015-2017

Towns/ County/State	1	2	3	4	5	6	7	8
Marlborough	Hypertension (933)	Mental Disorder (505)	Falls (378)	Diabetes (356)	Depressive Disorder (273)	Asthma (200)	COPD (184)	Heart Disease (166)
Middlefield	Hypertension (767)	Mental Disorder (407)	Diabetes (328)	Falls (249)	Depressive Disorder (239)	Heart Disease (236)	Asthma (183)	COPD (150)
Middletown	Hypertension (1052)	Mental Disorder (806)	Diabetes (531)	Falls (398)	Depressive Disorder (358)	Asthma (296)	COPD (287)	Heart Disease (242)
Old Lyme	Hypertension (940)	Mental Disorder (513)	Falls (404)	Diabetes (295)	Depressive Disorder (239)	Asthma (179)	Heart Disease (175)	COPD (158)
Old Saybrook	Hypertension (868)	Mental Disorder (547)	Falls (400)	Diabetes (303)	Depressive Disorder (221)	Asthma (182)	Heart Disease (175)	COPD (152)
Portland	Hypertension (827)	Mental Disorder (597)	Falls (350)	Diabetes (340)	Depressive Disorder (279)	Asthma (207)	COPD (182)	Heart Disease (161)
Westbrook	Hypertension (973)	Mental Disorder (559)	Falls (413)	Diabetes (311)	Depressive Disorder (265)	Asthma (235)	COPD (207)	Heart Disease (170)
Mdsx County	Hypertension (895)	Mental Disorder (589)	Diabetes (372)	Falls (363)	Depressive Disorder (268)	Asthma (226)	COPD (203)	Heart Disease (188)
CT Aggregate	Hypertension (1261)	Mental Disorder (694)	Diabetes (639)	Asthma (486)	Falls (328)	Depressive Disorder (326)	COPD (262)	Heart Disease (240)

Source: DataHaven Analysis of CHA CHIME data, 2019

Note: for asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators

Table 57a - Less Common Indicators, Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2015-2017

Towns/ County/State	9	10	11	12	13	14	15	16
Chester	Substance Abuse (112)	Motor Vehicle Accidents (71)	Dental (60)	Lung Cancer (28)	Diabetes Uncontrolled (27)	Stroke (20)	Homicide & Assault (14)	Suicide & Self Harm (5)
Clinton	Substance Abuse (127)	Motor Vehicle Accidents (93)	Dental (65)	Diabetes Uncontrolled (43)	Lung Cancer (29)	Stroke (25)	Homicide & Assault (17)	Suicide & Self Harm (7)
Colchester	Substance Abuse (153)	Motor Vehicle Accidents (80)	Diabetes Uncontrolled (47)	Dental (47)	Stroke (32)	Lung Cancer (28)	Homicide & Assault (20)	Suicide & Self Harm (11)
Cromwell	Substance Abuse (88)	Motor Vehicle Accidents (77)	Diabetes Uncontrolled (49)	Dental (38)	Lung Cancer (31)	Stroke (26)	Homicide & Assault (18)	Suicide & Self Harm (9)
Deep River	Substance Abuse (101)	Motor Vehicle Accidents (63)	Dental (56)	Diabetes Uncontrolled (43)	Stroke (22)	Lung Cancer (22)	Homicide & Assault (15)	Suicide & Self Harm (7)
Durham	Motor Vehicle Accidents (73)	Substance Abuse (56)	Dental (31)	Diabetes Uncontrolled (27)	Stroke (25)	Lung Cancer (17)	Homicide & Assault (8)	Suicide & Self Harm (2)
East Haddam	Substance Abuse (96)	Motor Vehicle Accidents (71)	Dental (46)	Lung Cancer (32)	Diabetes Uncontrolled (32)	Stroke (30)	Homicide & Assault (12)	Suicide & Self Harm (7)
East Hampton	Substance Abuse (102)	Motor Vehicle Accidents (94)	Dental (58)	Diabetes Uncontrolled (50)	Lung Cancer (28)	Stroke (28)	Homicide & Assault (19)	Suicide & Self Harm (7)
Essex	Substance Abuse (96)	Motor Vehicle Accidents (63)	Dental (47)	Diabetes Uncontrolled (29)	Stroke (27)	Lung Cancer (16)	Homicide & Assault (11)	Suicide & Self Harm (7)
Haddam	Substance Abuse (88)	Motor Vehicle Accidents (65)	Dental (40)	Diabetes Uncontrolled (39)	Lung Cancer (21)	Stroke (20)	Homicide & Assault (18)	Suicide & Self Harm (2)
Killingworth	Motor Vehicle Accidents (90)	Substance Abuse (75)	Dental (25)	Diabetes Uncontrolled (25)	Stroke (25)	Lung Cancer (23)	Homicide & Assault (12)	Suicide & Self Harm (5)
Lyme	Substance Abuse (6)	Stroke (4)	Dental (3)	Homicide & Assault (2)	Diabetes Uncontrolled (2)	Lung Cancer (0)	Suicide & Self Harm (0)	Asthma ***

Source: DataHaven Analysis of CHA CHIME data, 2019

Notes:

- 1) For asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators
- 2) Data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

Table 57b - Less Common Indicators, Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2015-2017

Towns/ County/State	9	10	11	12	13	14	15	16
Marlborough	Substance Abuse (94)	Motor Vehicle Accidents (60)	Dental (39)	Diabetes Uncontrolled (32)	Stroke (31)	Lung Cancer (13)	Homicide & Assault (12)	Suicide & Self Harm (6)
Middlefield	Substance Abuse (101)	Motor Vehicle Accidents (61)	Dental (31)	Lung Cancer (29)	Stroke (28)	Diabetes Uncontrolled (28)	Homicide & Assault (13)	Suicide & Self Harm (1)
Middletown	Substance Abuse (202)	Motor Vehicle Accidents (119)	Dental (78)	Diabetes Uncontrolled (72)	Homicide & Assault (51)	Stroke (35)	Lung Cancer (31)	Suicide & Self Harm (11)
Old Lyme	Substance Abuse (97)	Motor Vehicle Accidents (89)	Stroke (37)	Diabetes Uncontrolled (32)	Dental (30)	Lung Cancer (24)	Suicide & Self Harm (14)	Homicide & Assault (9)
Old Saybrook	Substance Abuse (102)	Motor Vehicle Accidents (72)	Diabetes Uncontrolled (40)	Dental (31)	Stroke (31)	Lung Cancer (25)	Homicide & Assault (17)	Suicide & Self Harm (7)
Portland	Substance Abuse (116)	Motor Vehicle Accidents (93)	Lung Cancer (45)	Dental (44)	Diabetes Uncontrolled (43)	Stroke (27)	Homicide & Assault (21)	Suicide & Self Harm (6)
Westbrook	Substance Abuse (122)	Motor Vehicle Accidents (108)	Dental (69)	Diabetes Uncontrolled (41)	Lung Cancer (33)	Homicide & Assault (25)	Stroke (23)	Suicide & Self Harm (10)
Mdsx County	Substance Abuse (127)	Motor Vehicle Accidents (92)	Dental (57)	Diabetes Uncontrolled (47)	Lung Cancer (28)	Stroke (28)	Homicide & Assault (27)	Suicide & Self Harm (8)
CT Aggregate	Substance Abuse (178)	Motor Vehicle Accidents (113)	Dental (58)	Diabetes Uncontrolled (57)	Homicide & Assault (35)	Stroke (29)	Lung Cancer (23)	Suicide & Self Harm (9)

Source: DataHaven Analysis of CHA CHIME data, 2019

Note: for asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators

INDICATOR ENCOUNTER RATES BY TOWN – CHIMEDATA STUDY

The following tables present the age-adjusted rates (except for asthma) per town in Middlesex Health's service area, Middlesex County and Connecticut for the 16 indicators from the DataHaven ChimeData Study by the two three year time periods (2012-2014 and 2015-2017).

HEALTH INDICATORS

Table 58a - Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2012-2014 and 2015-2017 Comparison

Asthma (encounter rates only)			Chronic Obstructive Pulmonary Disease			Dental		
	2012- 2014	2015- 2017		2012- 2014	2015- 2017		2012- 2014	2015- 2017
Chester	126	184	Chester	164	157	Chester	75	60
Clinton	179	259	Clinton	156	224	Clinton	60	65
Colchester	282	340	Colchester	271	296	Colchester	62	47
Cromwell	181	189	Cromwell	192	180	Cromwell	40	38
Deep River	133	151	Deep River	161	211	Deep River	84	56
Durham	133	166	Durham	130	140	Durham	18	31
East Haddam	145	183	East Haddam	141	152	East Haddam	46	46
East Hampton	225	218	East Hampton	217	247	East Hampton	84	58
Essex	134	180	Essex	114	138	Essex	54	47
Haddam	139	168	Haddam	134	171	Haddam	24	40
Killingworth	128	200	Killingworth	106	152	Killingworth	40	25
Lyme	***	***	Lyme	17	17	Lyme	10	3
Marlborough	191	200	Marlborough	157	184	Marlborough	63	39
Middlefield	155	183	Middlefield	160	150	Middlefield	37	31
Middletown	285	296	Middletown	256	287	Middletown	101	78
Old Lyme	181	179	Old Lyme	145	158	Old Lyme	53	30
Old Saybrook	149	182	Old Saybrook	175	152	Old Saybrook	64	51
Portland	202	207	Portland	190	182	Portland	59	44
Westbrook	181	235	Westbrook	180	207	Westbrook	80	69
Mdsx County	200	226	Mdsx County	184	203	Mdsx County	69	57
CT Aggregate	374	486	CT Aggregate	192	262	CT Aggregate	78	58

Source: DataHaven Analysis of CHA CHIME data, 2019

Notes:

- 1) For asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators
- 2) Data points that have no value indicate where data has been suppressed as there was either a small number of encounters or not enough of a population from which to generalize

Table 58b - Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2012-2014 and 2015-2017 Comparison

Diabetes			Diabetes Uncontrolled			Heart Disease		
	2012-2014	2015-2017		2012-2014	2015-2017		2012-2014	2015-2017
Chester	221	254	Chester	11	27	Chester	114	126
Clinton	331	404	Clinton	10	43	Clinton	158	223
Colchester	456	527	Colchester	13	47	Colchester	247	261
Cromwell	382	395	Cromwell	14	49	Cromwell	214	194
Deep River	259	283	Deep River	8	43	Deep River	155	156
Durham	218	271	Durham	9	27	Durham	141	142
East Haddam	230	271	East Haddam	10	32	East Haddam	164	125
East Hampton	346	419	East Hampton	11	50	East Hampton	188	209
Essex	203	208	Essex	7	29	Essex	109	128
Haddam	284	290	Haddam	15	39	Haddam	176	189
Killingworth	243	278	Killingworth	11	25	Killingworth	175	162
Lyme	29	22	Lyme	3	2	Lyme	10	23
Marlborough	266	356	Marlborough	12	88	Marlborough	175	166
Middlefield	286	328	Middlefield	16	28	Middlefield	200	236
Middletown	532	531	Middletown	18	72	Middletown	239	242
Old Lyme	246	295	Old Lyme	7	32	Old Lyme	155	175
Old Saybrook	279	303	Old Saybrook	9	40	Old Saybrook	183	175
Portland	354	340	Portland	12	43	Portland	215	161
Westbrook	283	311	Westbrook	10	41	Westbrook	166	170
Middlesex County	348	372	Middlesex County	13	47	Middlesex County	188	188
CT Aggregate	527	639	CT Aggregate	16	57	CT Aggregate	202	240

Source: DataHaven Analysis of CHA CHIME data, 2019

Table 58c - Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2012-2014 and 2015-2017 Comparison

Hypertension			Lung Cancer			Stroke		
	2012-2014	2015-2017		2012-2014	2015-2017		2012-2014	2015-2017
Chester	630	685	Chester	33	28	Chester	18	20
Clinton	736	1019	Clinton	25	29	Clinton	26	25
Colchester	1028	1165	Colchester	29	28	Colchester	38	32
Cromwell	888	845	Cromwell	33	31	Cromwell	39	26
Deep River	714	936	Deep River	27	22	Deep River	24	22
Durham	667	740	Durham	12	17	Durham	32	25
East Haddam	665	784	East Haddam	16	32	East Haddam	30	30
East Hampton	939	1010	East Hampton	24	28	East Hampton	43	28
Essex	658	727	Essex	23	16	Essex	29	27
Haddam	764	737	Haddam	21	21	Haddam	24	20
Killingworth	626	764	Killingworth	22	23	Killingworth	36	25
Lyme	75	91	Lyme	5	0	Lyme	12	4
Marlborough	749	933	Marlborough	28	13	Marlborough	31	31
Middlefield	777	767	Middlefield	20	29	Middlefield	39	28
Middletown	1108	1052	Middletown	29	31	Middletown	41	35
Old Lyme	872	940	Old Lyme	23	24	Old Lyme	33	37
Old Saybrook	770	868	Old Saybrook	23	25	Old Saybrook	38	31
Portland	901	827	Portland	25	45	Portland	35	27
Westbrook	803	973	Westbrook	23	33	Westbrook	39	23
Middlesex County	851	895	Middlesex County	25	28	Middlesex County	35	28
CT Aggregate	1056	1261	CT Aggregate	22	23	CT Aggregate	33	29

Source: DataHaven Analysis of CHA CHIME data, 2019

BEHAVIORAL HEALTH INDICATORS

Table 59 - Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2012-2014 and 2015-2017 Comparison

Depressive Disorder			Mental Disorder			Substance Abuse		
	2012-2014	2015-2017		2012-2014	2015-2017		2012-2014	2015-2017
Chester	181	221	Chester	414	545	Chester	95	112
Clinton	212	254	Clinton	422	604	Clinton	134	127
Colchester	375	366	Colchester	564	750	Colchester	136	153
Cromwell	258	269	Cromwell	432	551	Cromwell	96	88
Deep River	192	256	Deep River	371	542	Deep River	83	101
Durham	179	189	Durham	300	368	Durham	79	56
East Haddam	187	215	East Haddam	314	421	East Haddam	77	96
East Hampton	257	279	East Hampton	461	575	East Hampton	118	102
Essex	180	202	Essex	328	460	Essex	78	96
Haddam	186	228	Haddam	327	483	Haddam	63	88
Killingworth	152	189	Killingworth	292	409	Killingworth	71	75
Lyme	22	17	Lyme	46	43	Lyme	10	6
Marlborough	239	273	Marlborough	373	505	Marlborough	92	94
Middlefield	212	239	Middlefield	330	407	Middlefield	100	101
Middletown	343	358	Middletown	641	806	Middletown	182	202
Old Lyme	245	239	Old Lyme	423	513	Old Lyme	122	97
Old Saybrook	220	221	Old Saybrook	395	547	Old Saybrook	84	102
Portland	261	279	Portland	415	597	Portland	102	116
Westbrook	222	265	Westbrook	424	559	Westbrook	144	122
Middlesex County	247	268	Middlesex County	448	589	Middlesex County	120	127
CT Aggregate	301	326	CT Aggregate	533	694	CT Aggregate	152	178

Source: DataHaven Analysis of CHA CHIME data, 2019

INJURIES INDICATORS

Table 60a - Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2012-2014 and 2015-2017 Comparison

Falls			Homicide & Assault			Motor Vehicle Accidents		
	2012-2014	2015-2017		2012-2014	2015-2017		2012-2014	2015-2017
Chester	345	345	Chester	18	14	Chester	96	71
Clinton	391	433	Clinton	17	17	Clinton	105	93
Colchester	369	378	Colchester	16	20	Colchester	97	80
Cromwell	318	276	Cromwell	16	18	Cromwell	89	77
Deep River	355	401	Deep River	21	15	Deep River	82	63
Durham	262	253	Durham	16	8	Durham	82	73
East Haddam	305	320	East Haddam	18	12	East Haddam	84	71
East Hampton	455	435	East Hampton	15	19	East Hampton	122	94
Essex	375	330	Essex	21	11	Essex	61	63
Haddam	343	339	Haddam	18	18	Haddam	94	65
Killingworth	293	299	Killingworth	17	12	Killingworth	102	90
Lyme	50	23	Lyme	2	2	Lyme	10	7
Marlborough	388	378	Marlborough	13	12	Marlborough	93	60
Middlefield	259	249	Middlefield	15	13	Middlefield	84	61
Middletown	455	398	Middletown	48	51	Middletown	135	119
Old Lyme	411	404	Old Lyme	18	9	Old Lyme	94	89
Old Saybrook	384	400	Old Saybrook	19	17	Old Saybrook	85	72
Portland	345	350	Portland	27	21	Portland	95	93
Westbrook	396	413	Westbrook	26	25	Westbrook	127	108
Middlesex County	380	363	Middlesex County	28	27	Middlesex County	107	92
CT Aggregate	345	328	CT Aggregate	38	35	CT Aggregate	121	113

Source: DataHaven Analysis of CHA CHIME data, 2019

Table 60b - Annualized Age-Adjusted Encounter Rates per 10,000 Residents, 2012-2014 and 2015-2017 Comparison

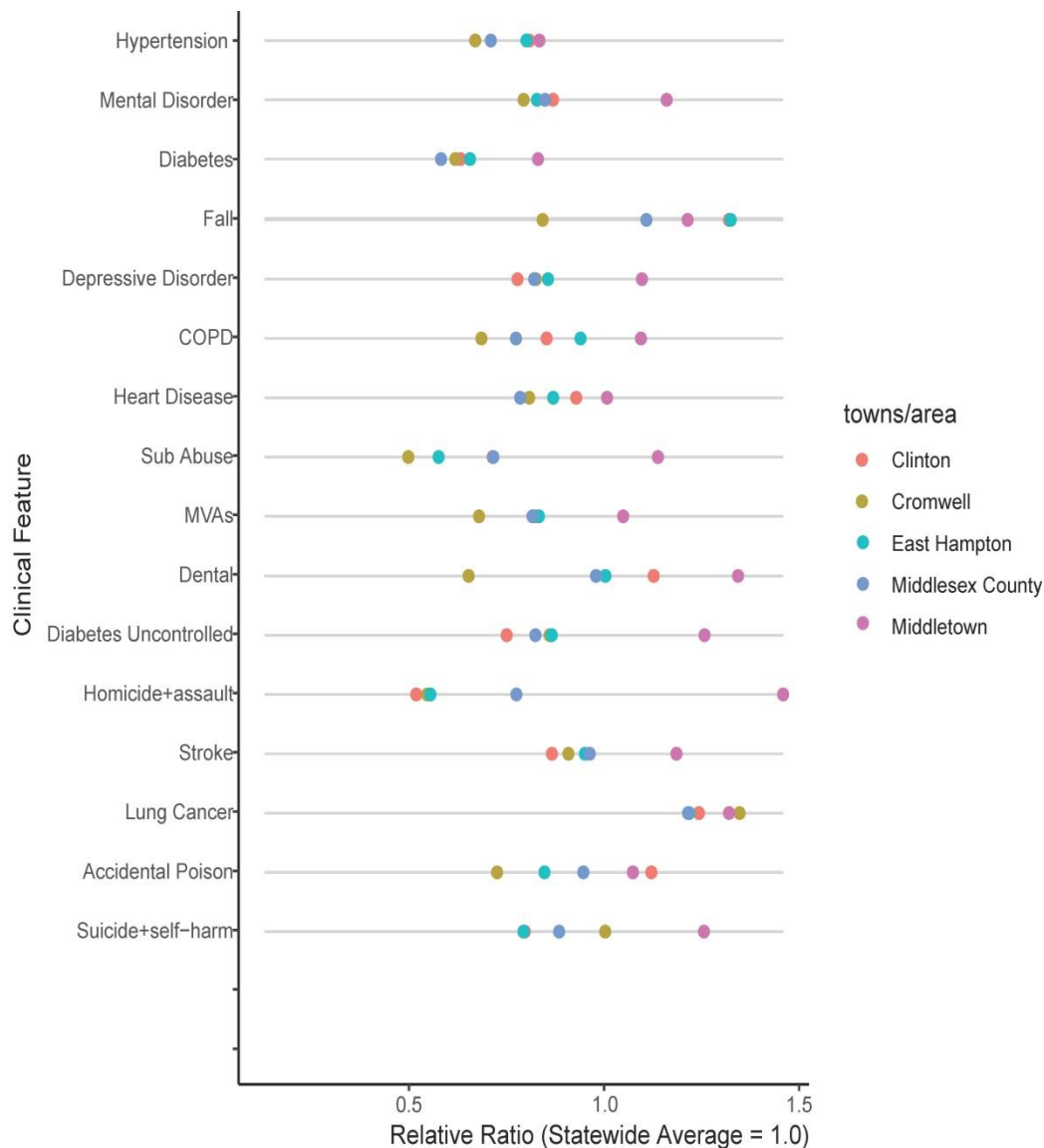
Suicide & Self Harm		
	2012-2014	2015-2017
Chester	8	5
Clinton	18	7
Colchester	23	11
Cromwell	10	9
Deep River	9	7
Durham	9	2
East Haddam	9	7
East Hampton	17	7
Essex	15	7
Haddam	9	2
Killingworth	13	5
Lyme	2	0
Marlborough	9	6
Middlefield	9	1
Middletown	19	11
Old Lyme	18	14
Old Saybrook	17	7
Portland	10	6
Westbrook	16	10
Middlesex County	14	8
CT Aggregate	16	9

Source: DataHaven Analysis of CHA CHIME data, 2019

INDICATOR RELATIVE RATES COMPOSITE – CHIMEDATA STUDY

For the largest towns in Middlesex County, DataHaven provided a relative rate (per 10,000 residents) composite where the State of Connecticut is set at 1.0 as a benchmark. For the selected towns, each health and health-related indicator is ranked against the state to assist in identifying where there may be concentrated issues, which helps with prioritization (**Figure 107**).

Figure 107 - Relative Rate Compared to CT Aggregate – Select Towns in Middlesex County



Source: DataHaven Analysis of CHA CHIME data, 2019

Note 1: MVAs = motor vehicle accidents

Note 2: Relative rate is per 10,000 residents

Note 3: Asthma is not included as age-adjusted encounter rates were not calculated for asthma

ENCOUNTER RATES – CHIMEDATA STUDY

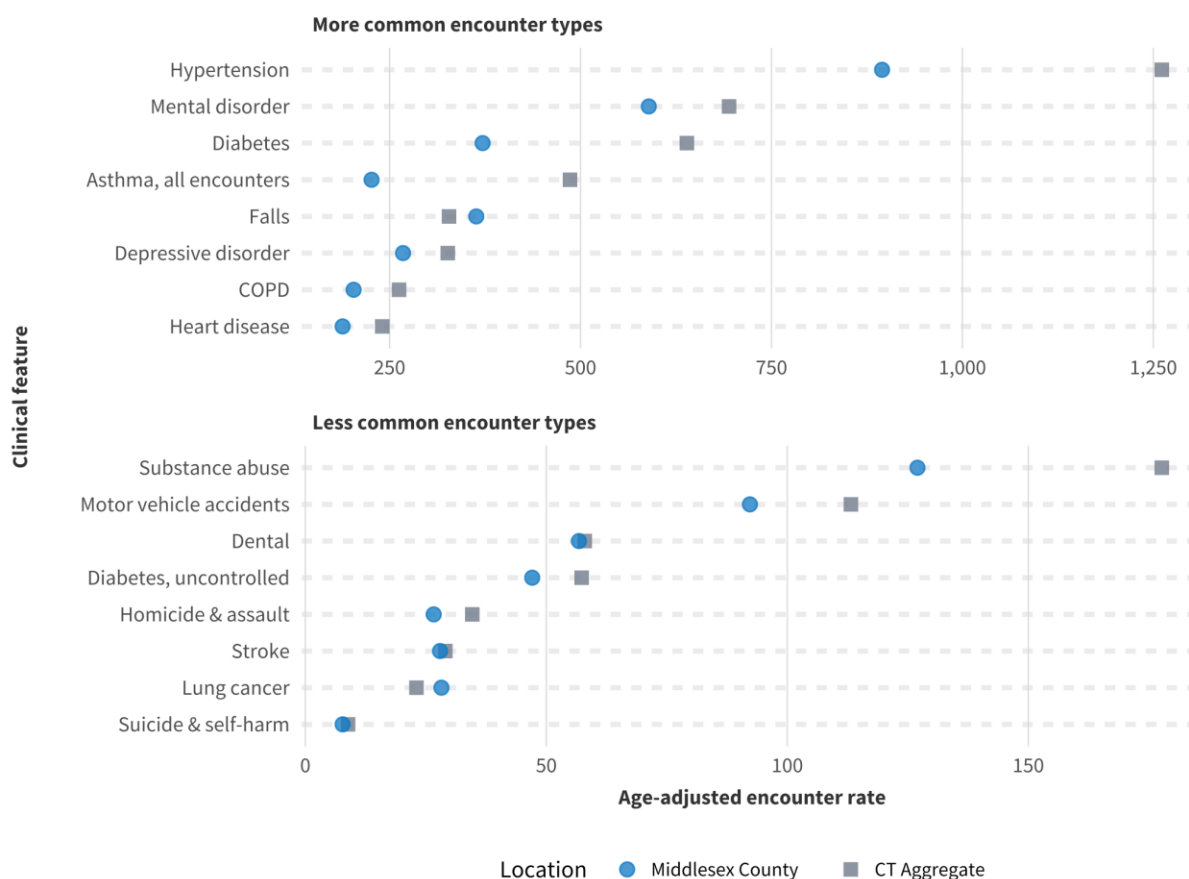
This section presents data for Middlesex County and Middletown for the 16 indicators from the DataHaven ChimeData Study for: 1) more common (rate of 250-1,250) and less common (rate of 0-200) indicator annualized age-adjusted encounter rates (except asthma, which was not age-adjusted) per 10,000 residents for the 2015-2017 time frame; 2) indicator relative encounter rates per 10,000 residents where the State of Connecticut is set at 1.0 as a benchmark; and, 3) annualized age-adjusted encounter rates (except asthma, which was not age-adjusted) per 10,000 residents by the two three year time periods (2012-2014 and 2015-2017).

For similar DataHaven ChimeData Study graphs for all the towns in Middlesex Health’s service area, please refer to the companion report that can be accessed at <https://middlesexhealth.org/middlesex-and-the-community/serving-our-community/community-health-needs-assessment>.

MIDDLESEX COUNTY

Annualized age-adjusted encounter rates per 10,000 residents

Middlesex County and Connecticut, 2015-2017



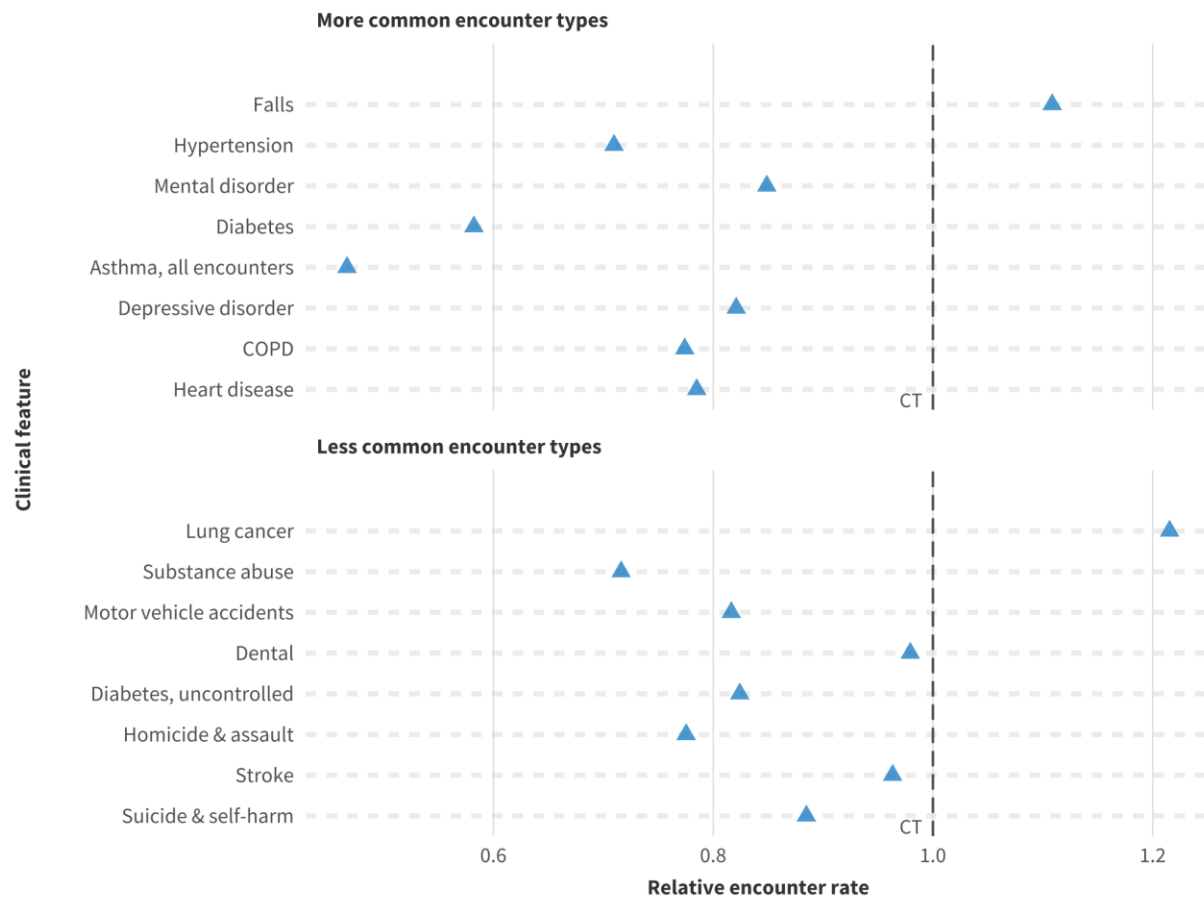
Source: DataHaven Analysis of CHA CHIME data, 2019

For asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators

MIDDLESEX COUNTY

Annualized relative encounter rates per 10,000 residents

Ratio to Connecticut rate, Middlesex County, 2015-2017

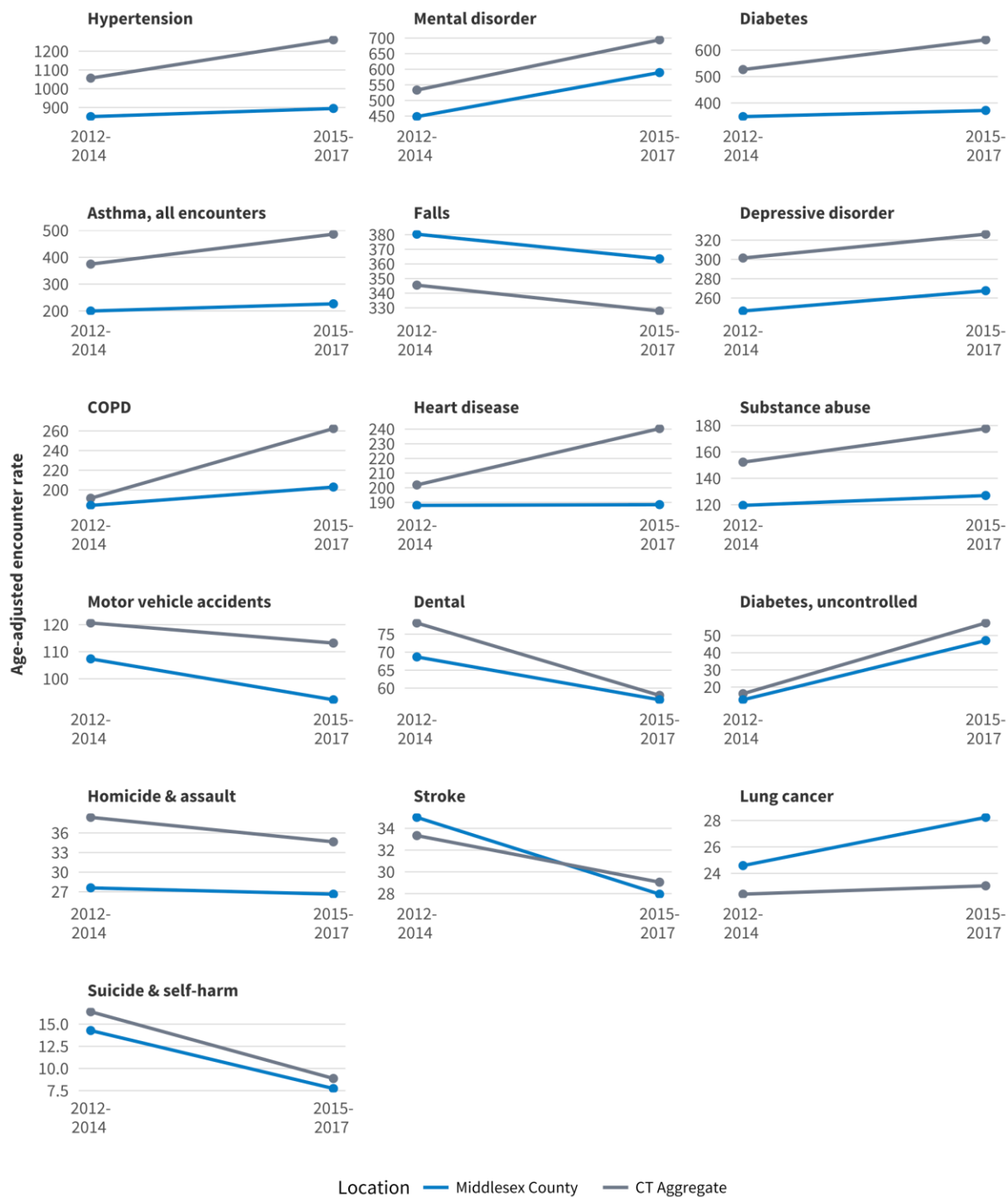


Source: DataHaven Analysis of CHA CHIME data, 2019

MIDDLESEX COUNTY

Annualized age-adjusted encounter rate per 10,000 residents

Middlesex County and Connecticut, 2012-2014 and 2015-2017



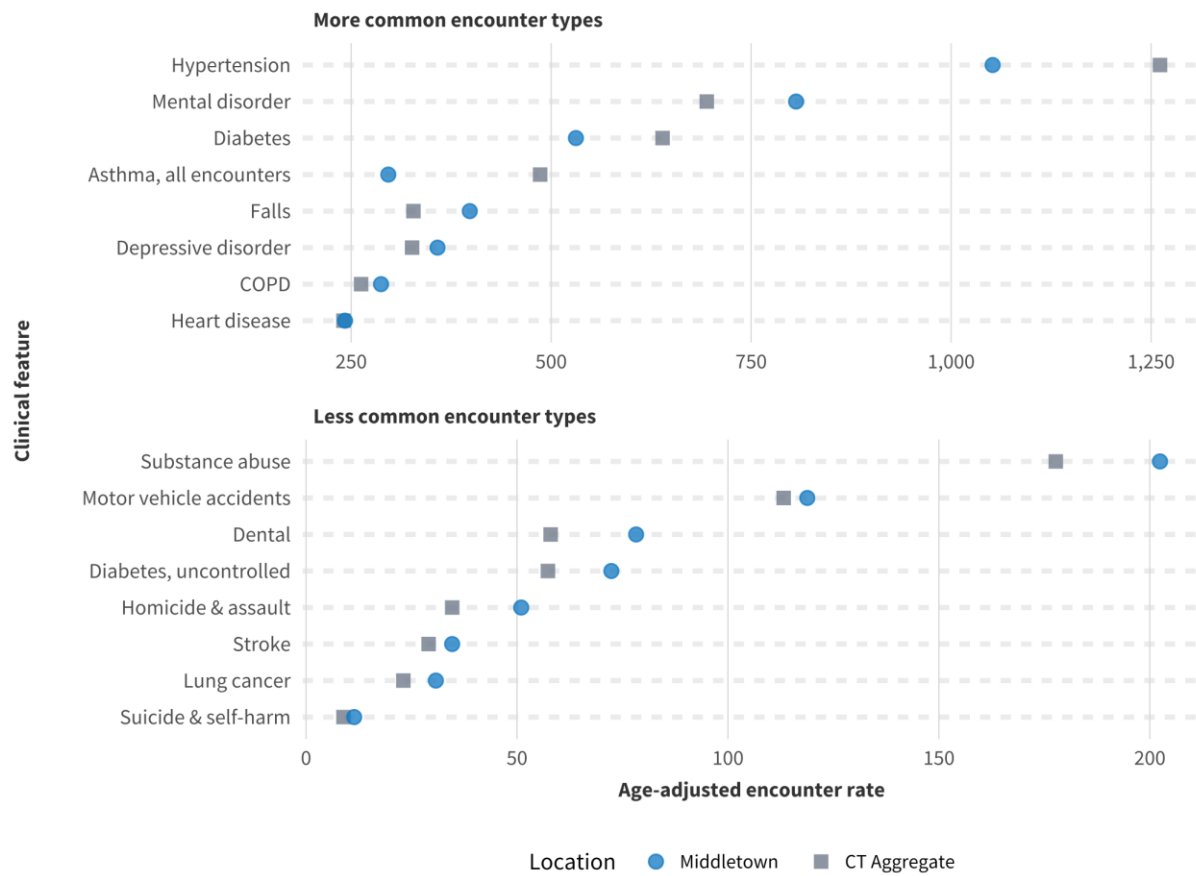
Source: DataHaven Analysis of CHA CHIME data, 2019

For asthma, age-adjusted encounter rates were calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators

MIDDLETOWN

Annualized age-adjusted encounter rates per 10,000 residents

Middletown and Connecticut, 2015-2017



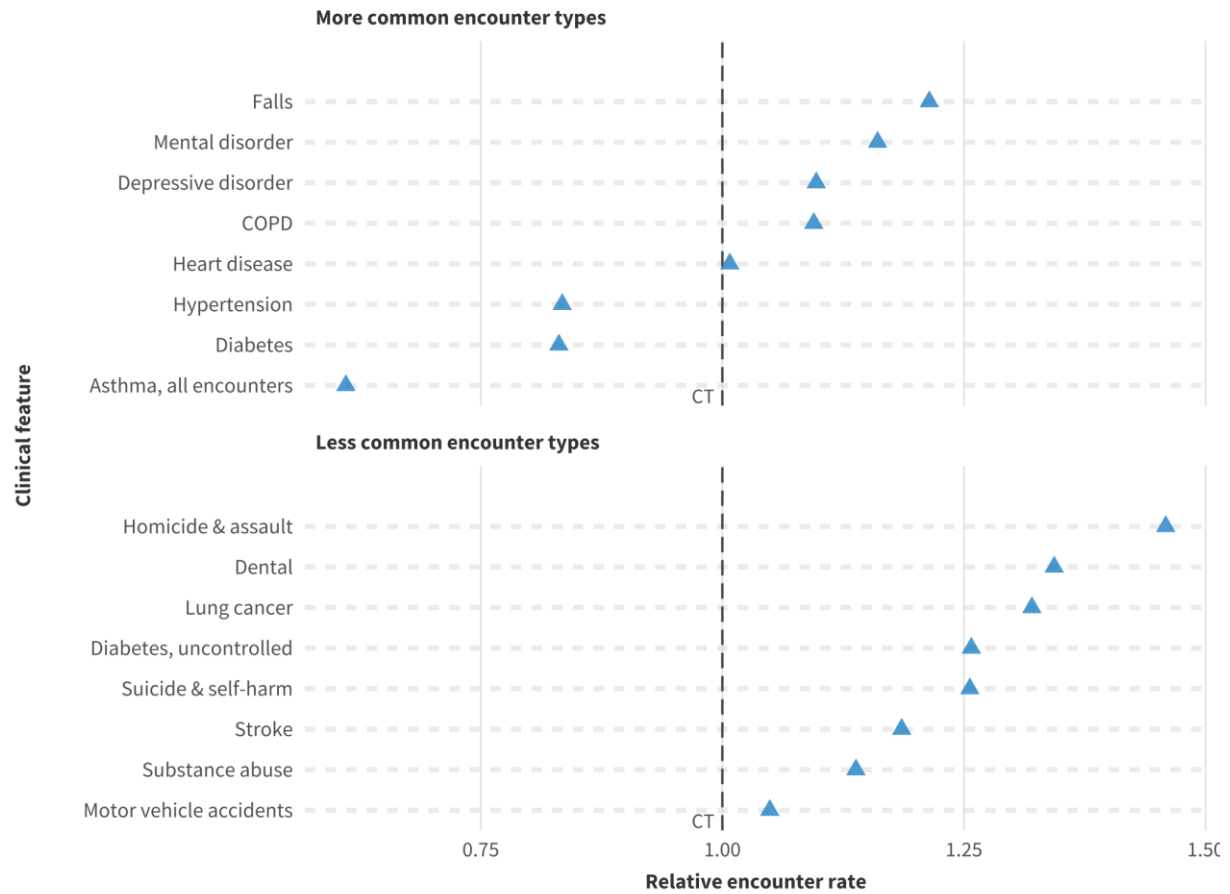
Source: DataHaven Analysis of CHA CHIME data, 2019

For asthma, age-adjusted encounter rates were not calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators

MIDDLETOWN

Annualized relative encounter rates per 10,000 residents

Ratio to Connecticut rate, Middletown, 2015-2017

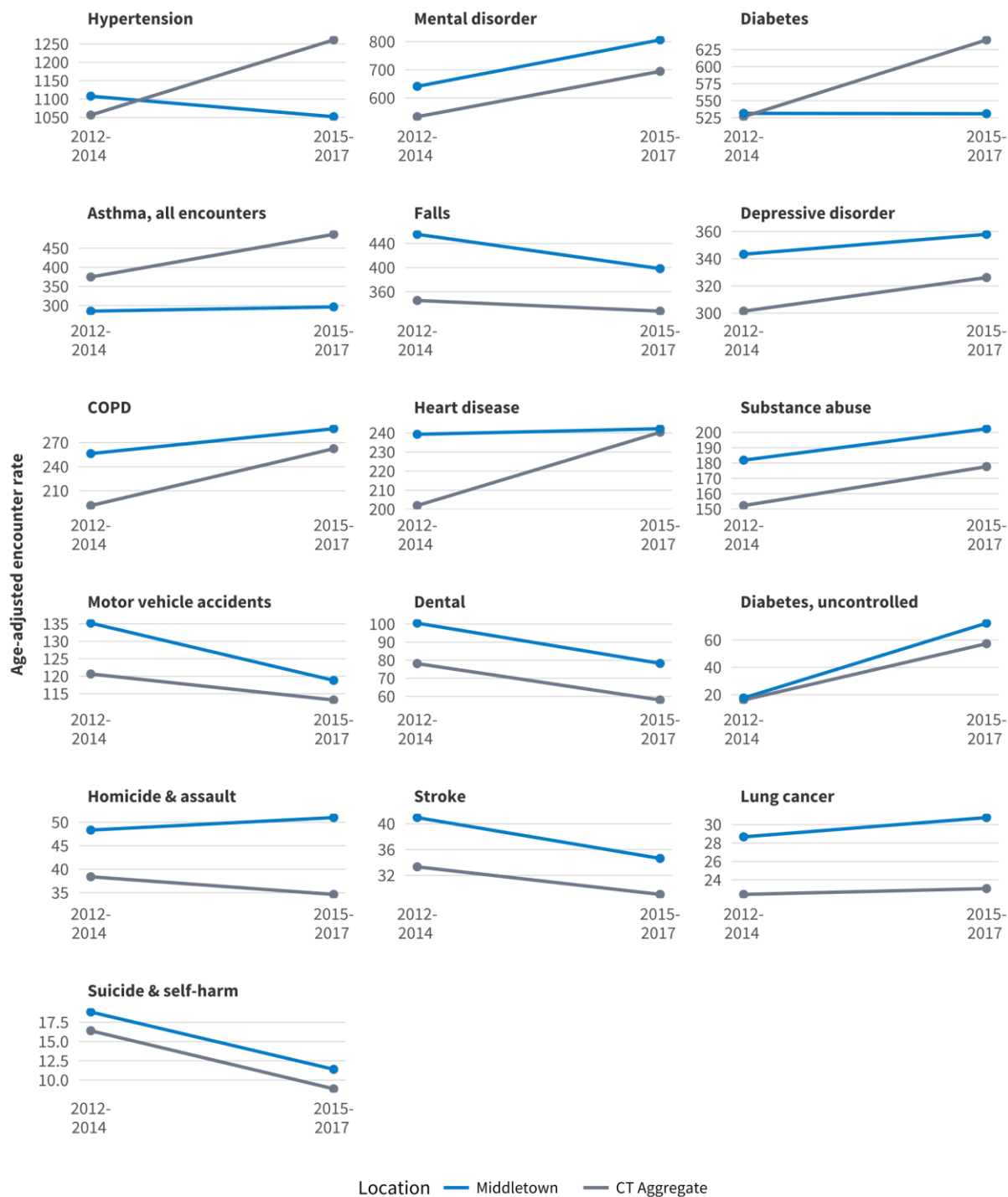


Source: DataHaven Analysis of CHA CHIME data, 2019

MIDDLETOWN

Annualized age-adjusted encounter rate per 10,000 residents

Middletown and Connecticut, 2012-2014 and 2015-2017



Source: DataHaven Analysis of CHA CHIME data, 2019

For asthma, age-adjusted encounter rates were calculated. Therefore, the total aggregate asthma encounter rates are used when comparing to total aggregate age-adjusted encounter rates for the other indicators



Part III

Appendix

References

Resources to Address Significant Health Needs –
Community Services

Resources to Address Significant Health Needs –
Clinical & Support Services

APPENDIX

Table A1 - Community Health Needs Assessment Advisory Committee Members & Represented Sectors/Communities

Name & Title	Organization	Sectors/Communities Represented
Reverend Robyn Anderson, Director	Ministerial Health Fellowship	Faith-Based Organization; Advocacy (equality for people of color)
Wesley Bell, RS, MS, MPH, Director of Health	Cromwell Health Department	Public Health
Monica Belyea, MPH, RD, Program Planner, Opportunity Knocks for Middletown's Young Children, Family Advocacy Maternal Child Health	Middlesex Health	Health Care - children; including at risk, low-income
Ed Bonilla, Vice President of Community Impact	Middlesex United Way	Community Based Organization; including at risk, low-income
Sherry Carlson, BSN, RN, Public Health Nurse	Connecticut River Area Health District	Public Health
Louis Carta, MA, Community Health Educator	Middletown Health Department	Public Health
Heather Chandor, Vice President of Operations	Middlesex YMCA	Community Based Organization; including at risk, low-income
Katharine Conroy, MPH, Marketing & Analytics Coordinator	Middlesex Health	Health Care
Sheila Daniels, Co-Chair Patient & Family Advisory Council	Middlesex Health PFAC	Patients & Families
Kevin Elak, R.S., Public Health Manager	Middletown Health Department	Public Health
Mary Emerling, RN, MPA, Middletown School Health Supervisor	Middletown Public Schools	School System; including at risk, low-income
Ann Faust, Executive Director	Coalition to End Homelessness	Homeless; at risk of homelessness
Margaret Flinter, APRN, PhD, c-FNP, FAAN, FAANP, Senior Vice President and Clinical Director	Community Health Center, Inc.	Health Care - general population; low-income; medically underserved
Rosa Flores, Unit Secretary and Cardiac Monitor Technician, Public Health Intern	Middlesex Health	Health Care
Joseph Havlicek, MD, Director of Health	Middletown Health Department	Public Health
Yvette Highsmith-Francis, Vice President, Eastern Region	Community Health Center, Inc.	Health Care - general population; low-income; medically underserved
Faith M. Jackson, Director of Equal Opportunity & Diversity Management & Veterans Service Contact Representative, City of Middletown and President, Middlesex County Branch NAACP	City of Middletown and Middlesex County Branch NAACP	Municipality; Advocacy (equality for people of color)
Michael Kalinowski, MD	Primary Care Physician and Community Health Advocate	Primary Care; Advocacy
Amber Kapoor, MPH, Health Education and Grants Coordinator, Cancer Center	Middlesex Health	Health Care
Hebe Kudisch, Chief Program Officer	Columbus House, Inc.	At risk population; homeless; low-income
Rebecca Lemanski, Director	Middletown Works! & Director, Community Resilience Collaborative	Community Based Organization; including at risk, low-income
Veronica Mansfield, DNP, APRN, AE-C, CCM, Manager of Clinical Practice, Center for Chronic Care Management	Middlesex Health	Health Care - general population; low-income; medically underserved

Table A1 - CHNA Advisory Committee Members & Represented Sectors/Communities, *Continued*

Name & Title	Organization	Sectors/Communities Represented
Robyn L. Martin, B.S. Public Health, Epidemiology Technician, Infection Prevention and Community Benefit Coordinator	Middlesex Health	Health Care
Catherine Martin, Community Benefit Intern	Middlesex Health	Health Care
Kit McKinnon MBA, BSN RN, CDE, CCM, NE-BC, Manager of Clinical Operations, Center for Chronic Care Management	Middlesex Health	Health Care - general population; low-income; medically underserved
Russell S. Melmed, MPH, Director of Health	Chatham Health District	Public Health
William Milardo Jr, RS, Assistant Health Director and Sanitarian	Durham Health Department	Public Health
Sarah Moore, MBA, Director of Development	Middlesex Health	Health Care
Salvatore Nesci, R.S., Public Health Coordinator	Cromwell Health Department	Public Health
Margaret O'Hagan-Lynch, Division Director Addiction Services	Connecticut Valley Hospital	Health Care - general population; low-income; medically underserved
Judy Omphroy, Middlesex County Branch NAACP Health Committee Chair & Applications Analyst, ITS Applications Revenue Cycle	Middlesex County NAACP Branch & Middlesex Health	Advocacy (equality for people of color); Health Care
Dan Osborne, LCSW, Chief Executive Officer	Gilead Community Services, Inc.	At risk population; low-income; medically underserved
Catherine Rees, MPH, Director, Community Benefit	Middlesex Health	Health Care
Terri Savino, DNP, RN, CPHQ, CPXP, Manager, Patient Experience and Service Excellence, Quality Improvement	Middlesex Health	Health Care
Thayer Talbott, Vice President, Programs & Operations	Community Foundation of Middlesex County	Community Program Infrastructure Support
Gary Wallace, Captain, Investigative Services Division Commander	Middletown Police Department & Middlesex Health Board of Directors	Public Safety & Health Care

Table A2 - Data Sources

Data Sources	Website
American Community Survey (ACS)	https://www.census.gov/programs-surveys/acs
Connecticut Coalition to End Homelessness	https://www.cceh.org/
Connecticut 2-1-1 Counts	http://ct.211counts.org/
Connecticut Data Collaborative	http://data.ctdata.org/
Connecticut Department of Public Health	https://portal.ct.gov/DPH
Connecticut Food Bank	http://www.ctfoodbank.org/
Connecticut Hospital Association	https://cthosp.org/
Connecticut State Data Center	https://ctsdc.uconn.edu/
Connecticut United Ways	https://www.ctunitedway.org/
County Health Rankings & Roadmaps	https://www.countyhealthrankings.org/
CMS Accountable Health Communities	https://innovation.cms.gov/initiatives/AHCM
CT Data	https://data.ct.gov/
DataHaven	https://www.ctdatahaven.org/
U.S. Census Quick Facts	https://www.census.gov/quickfacts/
U.S. Census Annual Population Estimates	https://www.census.gov/programs-surveys/popest.html

Table A3 - Middlesex Health Participation in Community Health Needs Assessment

Name	Participation
Catherine Rees, MPH, Director, Community Benefit	Author
Amber Kapoor, MPH, Health Education and Grants Coordinator, Middlesex Health Cancer Center	Planning & development
Robyn L. Martin, B.S. Public Health, Epidemiology Technician, Infection Prevention and Community Benefit Coordinator	Assets verification and updating; assistance with data verification
Catherine Martin, Community Benefit Intern	Assets verification and updating; CMS Accountable Health Communities Substance Abuse data collection

Table A4 - 2018 DataHaven Community Wellbeing Survey, Nature of the Sample

Residents Ate 18 or Older	Middletown	Middlesex County
Gender		
Male	47%	48%
Female	53%	52%
Age		
Under age 55	68%	59%
Age 55 or older	32%	41%
Education		
Some college or less	50%	21%
Some college or Associate's	***	29%
Bachelor's degree or higher	47%	50%
Income		
Less than \$75,000	53%	44%
\$75,000 or more	36%	43%
Children in Household		
Yes	***	23%
No	***	76%
Marital Status		
Single, never married	35%	29%
Married or civil union	41%	49%
Living with partner	7%	3%
Separated	1%	0%
Divorced	9%	10%
Widowed	5%	8%

Source: DataHaven Community Wellbeing Survey, 2018

Table A5 – 2018 DataHaven Community Wellbeing Survey Questions

Q#	Question
Q1	Are you satisfied with the city or area where you live?
Q2	As a place to live, is the city or area where you live getting much better, getting somewhat better, remaining about the same, getting somewhat worse or getting much worse?
	<i>Now I'm going to ask you to think about some aspects of life in your city or area. For each of the following, I'd like you to rate that part of life in your area as excellent, good, fair, poor or let me know if you simply don't know enough in order to say [Q4A-Q4H ROTATED]</i>
Q4A	How responsive local government is to the needs of residents
Q4D	The job done by the police to keep residents safe
Q4E	The ability of residents to obtain suitable employment
Q4F	As a place to raise children
Q4G	The condition of public parks and other public recreational facilities
Q4H	The availability of affordable, high-quality fruits and vegetables
Q6	How would you describe your ability to influence local-government decision making? Would you say that you have great influence, moderate influence, a little influence, or no influence at all?
Q9	Do you have access to a car when you need it? Would you say you have access...
Q57	Now, tell us more about yourself... What is your marital status?
Q60	What is the number of adults, 18 and older (including yourself) living in the household?
Q11	Do you own your home, rent, or something else?
MOVEYEAR	In what year did you move into your current home?
RECENT MOVE	(If moved since 2016) Where were you living just before you moved to your current home in <YEAR>?
Q13R1	(If not own home) In the past 12 months, have you experienced any problems with your house or apartment that you felt needed to be fixed, such as a leak or a broken appliance?
Q14R1	(If not own home) Do you expect to purchase a home in the next 5 years?
Q15	(If age 55 or older) Do you think your current home has the physical features it needs to be suitable and convenient as a place to grow older?
	<i>The next group of questions is about your neighborhood, that is, the area around your home that you could walk to in 10 or 15 minutes or that area you consider to be your neighborhood. How much do you agree or disagree with each of the following statements about your neighborhood? Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree?</i>
Q17A	Many stores, banks, markets or places to go are within easy walking distance of my home.
Q17B	There are safe sidewalks and crosswalks on most of the streets in my neighborhood.
Q17C	There are places to bicycle in or near my neighborhood that are safe from traffic, such as on the street or on special lanes, separate paths or trails.
Q17E	My neighborhood has several free or low cost recreation facilities such as parks, playgrounds, public swimming pools, etc.
Q17F	I do not feel safe to go on walks in my neighborhood at night.
Q17G	People in this neighborhood can be trusted.
Q17H	Children and youth in my town generally have the positive role models they need around here.
Q17I	People in this neighborhood are involved in trying to improve the neighborhood.
	<i>Now thinking about the future of young people in your neighborhood, for each of the following life events, how likely do you think it is that a typical young person in your neighborhood will experience each of the following, is it almost certain, very likely, a toss-up, not very likely, or not at all likely?</i>
LIFECA	Graduate from high school

Source: DataHaven Community Wellbeing Survey, 2018

Table A5 – 2018 DataHaven Community Wellbeing Survey Questions, *Continued*

Q#	Question
LIFECB	Get a job with opportunities for advancement
LIFECC	Be in a gang
LIFECD	Abuse drugs or alcohol
LIFECF	Get arrested for a felony
	<i>The next set of questions are about your health.</i>
Q19	How would you rate your overall health, would you say your health is excellent, very good, good, fair or poor?
Q20	Overall, how satisfied are you with your life nowadays?
Q21	Overall, how happy did you feel yesterday?
Q22	Overall, how anxious did you feel yesterday?
Q23	Overall, to what extent do you have the time you need to do things that you really enjoy?
Q23PL	How strongly do you agree with this statement: I lead a purposeful and meaningful life. Do you strongly agree, agree, slightly agree, neither agree nor disagree, slightly disagree, disagree, or strongly disagree?
	<i>Have you ever been told by a doctor or health professional that you have any of the following?</i>
Q23A	High blood pressure or hypertension
Q23C	Diabetes
Q23D	Heart disease or have you ever had a heart attack
Q23E	Asthma
Q23E2	(If have asthma) Do you still have asthma?
BMIR	BMI (Based on height and weight)
Q26	Do you have health insurance?
Q27	(If have health insurance) What type of health insurance do you have?
Q28	During the past 12 months, was there any time when you didn't get the medical care you needed?
Q29	And was there any time during the past 12 months when you put off or postponed getting medical care you thought you needed?
Q31	During the past 12 months, was there any time you needed prescription medicines but didn't get them because you couldn't afford it?
Q32	Do you have one person or place you think of as your personal doctor or health care provider?
Q33	(If not have one person or place as health care provider) Is that because you have more than one personal doctor, or none at all?
Q34	In the past 12 months, how many times did you receive care in a hospital emergency room?
Q35	When was the last time you were seen by a dentist, was it..
Q37_1	How often do you get the social and emotional support you need?
	<i>Over the past 2 weeks, how often have you been bothered by any of the following problems?</i>
Q37_2	Little interest or pleasure in doing things
Q37_3	Feeling down, depressed, or hopeless
Q38	In an average week, how many days per week do you exercise?
Q39	Have you smoked at least 100 cigarettes in your entire life?
Q40	(If smoked at least 100 cigarettes) Do you currently smoke cigarettes every day, some days or not at all?
Q42	Have you ever tried using vapor or vape pens, electronic cigarettes or E-cigarettes (such as blu, Vuse), even just one time in your entire life?
Q43	(If used vapor or vape pens, electronic cigarettes or E-cigarettes) During the past 30 days, on how many days did you use these?

Source: DataHaven Community Wellbeing Survey, 2018

Table A5 – 2018 DataHaven Community Wellbeing Survey Questions, *Continued*

Q#	Question
ALCOHOL	Considering all types of alcoholic beverages, how many times during the past 30 days did you have <5 for men <4 for women drinks on an occasion?
POT1	During the past 30 days, on how many days did you use marijuana or cannabis?
	<i>I have a few questions about prescription painkillers. When we ask about prescription painkillers, we mean strong ones, sometimes called opioids, such as Percocet, OxyContin or Vicodin. Let me remind you that this is a completely confidential interview. Do you personally know anyone who has struggled with misuse or addiction to heroin or other opiates such as prescription painkillers at any point during the last 3 years?</i>
OPIOID2_1	(If know someone who struggled with prescription painkillers) Who do you know that has struggled with this at any point during the past 3 years? Is it...
OPIOID4	Do you personally know anyone who has ever died from an opioid overdose?
Q44	On another topic, how well would you say you are managing financially these days? Would you say you are...
Q46	If you lost all your current sources of household income, including your paycheck, public assistance, or other forms of income, about how long do you think you could continue to live as you live today?
DEBT	Suppose you and others in your household were to sell all of your major possessions (including your home), turn all of your investments and other assets into cash, and pay off all of your debts. Would you have something left over, break even, or be in debt?
Q47	Have you had a paid job in the last 30 days?
Q49	(If had paid job in last 30 days) During this time, has your job been full time or part time?
Q50	(If had paid job in last 30 days that was part time) Are you working part-time by choice, or would you rather have a full-time job?
Q56	What is your primary means of transportation to work, school, or the place where you spend most of your time outside of home?
	<i>I'm going to read a list of things that you may or may not have experienced in the past 12 months, that is, since <month> 2017. Please let me know if any of these things happened to you, or not.</i>
Q62	Have there been times in the past 12 months when you did not have enough money to buy food that you or your family needed?
Q64	In the last 12 months, have you not had enough money to provide adequate shelter or housing for you or your family?
Q64_GAS	In the last 12 months, has the electric, gas, oil, or water company threatened to shut off services in your home?
Q65	In the past 12 months, did you stay home when you needed or wanted to go someplace because you had no access to reliable transportation?
Q66	In the last 12 months, have you held a checking or savings account?
Q68	In the past 12 months, have you had anyone deliberately vandalize, try to steal, or steal any property that you own, or anyone attempt to break into your home?
Q69	In the past 12 months, have you had an experience in which someone attacked you, tried to take something from you by force, or physically threatened you?
	<i>In the following questions, we are interested in the way other people have treated you or your beliefs about how other people have treated you. Can you tell me if any of the following has ever happened to you:</i>
DISCRIM1	At any time in your life, have you ever been unfairly fired, unfairly denied a promotion or raise, or not hired for a job for unfair reasons?
DISCRIM2	Have you ever been unfairly stopped, searched, questioned, physically threatened, or abused by the police?

Source: DataHaven Community Wellbeing Survey, 2018

Table A5 – 2018 DataHaven Community Wellbeing Survey Questions, *Continued*

Q#	Question
DISCRIM4	Have you ever been unfairly prevented from moving into a neighborhood because the landlord or a realtor refused to sell or rent you a house or apartment?
DISCRIM5	When seeking health care, have you ever been treated with less respect or received services that were not as good as what other people get?
Q77	Is English the primary language spoken in your home?
Q79	Were you born in the United States?
MILITARY	Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?
DISABILITY	Does any disability, handicap, or chronic disease keep you from participating fully in work, school, housework, or other activities?
	<i>The next two questions are about sexual orientation and gender identity.</i>
SOCI1	Which of the following best represents how you think of yourself?
SOCI2	Do you consider yourself to be transgender?

Source: DataHaven Community Wellbeing Survey, 2018

DataHaven

DataHaven Community Health Needs Assessment CHIME Data Analysis: Middlesex County

By Alexandra Bourdillon, DataHaven, May 2019

Data about residents' visits to hospitals and emergency rooms may be used as a tool to examine variations in health and quality of life by geography and within specific populations¹. Unless otherwise noted, all information in this analysis is based on a DataHaven analysis (2018) of 2012-2014 and 2015-2017 CHIME data provided by the Connecticut Hospital Association upon request from a special study agreement with partner hospitals and DataHaven. The CHIME hospital encounter data extraction included de-identified information for each of over 10 million Connecticut hospital and emergency department encounters incurred by any residents of any town in Connecticut. Any encounter incurred by any resident of these towns at any Connecticut hospital would be included in this dataset, regardless of where they received treatment.

In order to develop statewide geographic benchmark comparisons within the CHIME data that could be used to provide context, DataHaven developed a statewide aggregate as well as rates for the "Five Connecticuts," clusters of towns initially developed and updated by Don Levy in 2015 based on income, poverty, and population density.

Each encounter observation had a unique encounter ID and was populated within CHIME with one or more "indicator flags" representing a variety of conditions. Each encounter could include multiple indicator flags. Because CHIME is Connecticut-based, only hospital encounters occurring in CT were captured; therefore, encounters for individuals residing in CT towns bordering other states are more likely under-reported in some cases.

As part of its larger Community Wellbeing Index report (see ctdatahaven.org/reports), DataHaven staff and consultants calculated annualized encounter rates for the indicator flags assigned within the dataset including Asthma, COPD, Substance Abuse, and many other conditions. Analyses in this document describe data on "all hospital encounters" including inpatient, emergency department (ED), and observation encounters. Annualized encounter rates per 10,000 persons were calculated for the 3-year period 2012-2014 and the 3-year period 2015-2017 by merging CHIME data with population data.

For each geographic area and indicator, our analysis generally included an annualized encounter rate for populations in each of six age strata (0-19, 20-44, 45-64, 65-74, 75-84, and 85+ years), and by gender, as well as a single age-adjusted annualized encounter rate. It is important to note that there is no way to discern the unique number of individuals in any zip code, town, area, or region who experienced hospital encounters during the period under examination or the number of encounters that represented repeat encounters by the same individual for the same or different conditions. To better examine encounter rates for asthma, the age-strata used to calculate asthma encounter rates differed from age groupings used for the other disease encounter types (0-4, 5-19, 20-44, 45-64, 65-74, and 75+ years), and age-adjusted rates were not calculated.

To reflect trends that may be more reliable, disaggregated encounter rates were only included if a given demographic subset of age and gender within a town included at least 30 encounters. If some towns experienced fewer than 30 encounters, you may only see statewide rates plotted, but not a town rate.

¹Data for other towns, zip codes, and regions are available via the regional Community Health Needs Assessment. We recommend comparing the information in this analysis to information from surrounding towns, counties, and similar communities. General demographic information is also available at ctdatahaven.org/communities.

Table A7a - Key Informant Survey, Access to Care, % of Respondents who “Strongly Agree” with Statements, Community

Access/Availability Statements	Strongly Agree %
Residents have access to a primary care provider	32.7%
Residents have access to dental care	25.1%
Residents have access to a medical specialist when needed (cardiologist, dermatologist, neurologist, etc.)	22.9%
Residents have access to older adult services	16.1%
There is a sufficient number of providers accepting Medicaid, Medicare, and medical assistance	13.0%
Residents can access timely health services that fit within their schedule	9.1%
Providers work to address the needs of populations in a way that acknowledges and is sensitive to cultural and racial/ethnic differences	8.5%
Residents can obtain, process, and understand basic health information and services needed to make appropriate health decisions	7.7%
Transportation for medical appointments is available to residents when needed	7.7%
There is a sufficient number of mental health providers	7.2%
Residents have access to affordable medications (including those for chronic diseases)	6.3%
Residents have access to LGBTQ+ (lesbian, gay, bisexual, transgender, queer/questioning+) services	5.4%
There is a sufficient number of substance abuse treatment providers	4.5%
There is sufficient access to affordable mental health services	4.5%
There is a sufficient number of bilingual providers	4.5%
There is sufficient access to affordable substance abuse treatment services	2.7%

Table A7b - Key Informant Survey, Access to Care, % of Respondents who “Strongly Agree” with Statements, Hospital

Access/Availability Statements	Strongly Agree %
Residents have access to a primary care provider	36.4%
Residents have access to dental care	23.3%
Residents have access to LGBTQ+ (lesbian, gay, bisexual, transgender, queer/questioning+) services	23.3%
Residents have access to a medical specialist when needed (cardiologist, dermatologist, neurologist, etc.)	19.7%
Residents have access to older adult services	18.0%
Providers work to address the needs of populations in a way that acknowledges and is sensitive to cultural and racial/ethnic differences	17.3%
There is a sufficient number of providers accepting Medicaid, Medicare, and medical assistance	14.5%
There is a sufficient number of mental health providers	9.9%
There is a sufficient number of bilingual providers	7.0%
Residents can access timely health services that fit within their schedule	6.4%
There is sufficient access to affordable mental health services	6.4%
There is a sufficient number of substance abuse treatment providers	5.9%
There is sufficient access to affordable substance abuse treatment services	5.9%
Residents can obtain, process, and understand basic health information and services needed to make appropriate health decisions	5.8%
Transportation for medical appointments is available to residents when needed	5.2%
Residents have access to affordable medications (including those for chronic diseases)	3.5%

Table A8a - Key Informant Survey, Access to Care, % of Respondents who “Strongly Disagree” with Statements, Community

Access/Availability Statements	Strongly Disagree %
There is sufficient access to affordable mental health services	25.6%
There is sufficient access to affordable substance abuse treatment services	24.0%
There is a sufficient number of mental health providers	20.2%
There is a sufficient number of substance abuse treatment providers	19.8%
Residents have access to affordable medications (including those for chronic diseases)	19.4%
There is a sufficient number of bilingual providers	15.7%
Transportation for medical appointments is available to residents when needed	13.6%
Residents can access timely health services that fit within their schedule	11.3%
There is a sufficient number of providers accepting Medicaid, Medicare, and medical assistance	8.5%
Residents can obtain, process, and understand basic health information and services needed to make appropriate health decisions	8.2%
Providers work to address the needs of populations in a way that acknowledges and is sensitive to cultural and racial/ethnic differences	6.7%
Residents have access to dental care	4.5%
Residents have access to older adult services	3.6%
Residents have access to LGBTQ+ (lesbian, gay, bisexual, transgender, queer/questioning+) services	3.6%
Residents have access to a medical specialist when needed (cardiologist, dermatologist, neurologist, etc.)	3.1%
Residents have access to a primary care provider	1.4%

Table A8b - Key Informant Survey, Access to Care, % of Respondents who “Strongly Disagree” with Statements, Hospital

Access/Availability Statements	Strongly Disagree %
There is sufficient access to affordable mental health services	32.0%
There is sufficient access to affordable substance abuse treatment services	28.7%
There is a sufficient number of mental health providers	27.5%
There is a sufficient number of substance abuse treatment providers	26.3%
Residents have access to affordable medications (including those for chronic diseases)	20.8%
Transportation for medical appointments is available to residents when needed	19.2%
Residents can access timely health services that fit within their schedule	9.4%
There is a sufficient number of bilingual providers	8.7%
There is a sufficient number of providers accepting Medicaid, Medicare, and medical assistance	8.7%
Residents can obtain, process, and understand basic health information and services needed to make appropriate health decisions	6.4%
Residents have access to a medical specialist when needed (cardiologist, dermatologist, neurologist, etc.)	4.6%
Providers work to address the needs of populations in a way that acknowledges and is sensitive to cultural and racial/ethnic differences	3.5%
Residents have access to older adult services	2.9%
Residents have access to dental care	2.3%
Residents have access to LGBTQ+ (lesbian, gay, bisexual, transgender, queer/questioning+) services	2.3%
Residents have access to a primary care provider	0.6%

Table A9a - Key Informant Survey, Impact on Health of Community, % of Respondents who Selected “Significant Impact”, Community

Indicators	Significant Impact %
Mental Health - Adults	63.8%
Mental Health - Adolescents	60.3%
Substance Abuse	57.3%
Mental Health - Children	56.0%
Adverse Childhood Experiences	52.3%
Cancer	43.2%
Overweight / Obesity	40.6%
Maternal / infant Health	32.3%
Diabetes	31.9%
Suicide	31.0%
Heart Disease / Congestive Heart Failure	28.3%
Alzheimer's / Other Dementias	24.0%
Dental Health / Oral Health	18.2%
Unintentional Injuries (car accidents, falls, etc.)	16.1%
Asthma	16.0%
Chronic Obstructive Pulmonary Disease (COPD)	15.3%
Chronic Liver Disease and Cirrhosis	12.4%
Stroke	12.1%
Sexually Transmitted Diseases (STDs)	11.9%
Pneumonia and Influenza (flu)	10.6%
Other (please specify)	9.4%

Table A9b - Key Informant Survey, Impact on Health of Community, % of Respondents who Selected “Significant Impact”, Hospital

Indicators	Significant Impact %
Mental Health - Adults	68.7%
Substance Abuse	66.7%
Mental Health - Adolescents	60.6%
Mental Health - Children	53.5%
Adverse Childhood Experiences	47.0%
Cancer	46.8%
Heart Disease / Congestive Heart Failure	45.2%
Overweight / Obesity	44.9%
Diabetes	44.1%
Suicide	41.9%
Alzheimer's / Other Dementias	34.8%
Chronic Obstructive Pulmonary Disease (COPD)	33.0%
Maternal / Infant Health	29.3%
Asthma	24.1%
Unintentional Injuries (car accidents, falls, etc.)	22.7%
Chronic Liver Disease and Cirrhosis	22.0%
Stroke	21.4%
Pneumonia and Influenza (flu)	19.3%
Dental Health / Oral Health	16.6%
Sexually Transmitted Diseases (STDs)	14.9%
Other (please specify)	8.5%

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RESOURCES TO ADDRESS SIGNIFICANT HEALTH NEEDS – Community Services

These community resources represent assets for broad health and health-related needs, including resources for the significant health and health-related needs identified in this CHNA.

Community Resources

Organization Information	Brief Description
<p>The Buttonwood Tree 605 Main Street, PO Box 71 Middletown, CT 06457 (860) 347-4957 https://buttonwood.org/</p>	<p>The Mission of The Buttonwood Tree is to support the creative endeavors of emerging artists, nurture personal development, educate, connect and enrich lives and uplift people of all ages through the arts.</p>
<p>CHEER (Comfortable, Healthy, Energy, Efficient, Renewable) Contact: Michael Harris, PE Energy Coordinator, City of Middletown (860) 638-4854 michael.harris@middletownct.gov</p>	<p>Access for all to quality living spaces and lower-cost renewable energy. The CHEER program brings comprehensive (one-stop) support for livable housing in Middletown. Low-income dwellings (& some middle-income) get the help they need for better living conditions.</p>
<p>Middlesex County Chamber of Commerce 393 Main Street Middletown, CT 06457 (860) 347-6924 https://www.middlesexchamber.com/</p> <p>Committees/Councils Include:</p> <ul style="list-style-type: none"> ● Affordable Housing Committee ● Ambassador Program/Committee ● Arrigoni Bridge Committee ● Audit Committee ● Automotive Council ● Business & Educational Partnership Advisory Council ● Car Cruise Committee ● Connecticut Connections Committee ● Distinguished Citizens Committee ● Environment & Infrastructure Committee ● Health Care Council Steering Committee ● Holiday on Main Street Committee ● Human Resource Council ● Insurance Committee ● Legislative Committee 	<p>The Middlesex County Chamber of Commerce is a business organization with over 2,175 members. It strives to be the voice of business in Middlesex County and the surrounding area. It also strives to be a community organization. It runs a number of events and programs that support youth development, substance abuse prevention, and veterans.</p> <p>Committees/Councils (continued):</p> <ul style="list-style-type: none"> ● LEAD CT - Leadership, Empowerment & Development ● Manufacturer's Council ● Middlesex County Substance Abuse Action Council (MCSAAC) ● Prevention Committee ● Real Estate Council ● Support The Troops Committee ● Taste of Downtown Auction Committee ● Technology Committee ● Tourism Steering Commission ● WBA - Women's Business Alliance ● Women's Leadership Collaborative ● YPA - Young Professionals' Alliance
<p>Middlesex United Way 100 Riverview Center, Suite 230 Middletown, CT 06457 (860) 346-8695 http://www.middlesexunitedway.org/</p>	<p>Mission: By cultivating leadership and partnerships, bringing resources together, and investing in our community, Middlesex United Way acts as a catalyst to achieve measurable, positive impact in education, income, health and housing.</p>
<p>Rotary Club of Middletown Connecticut Rotary Club of Middletown, CT - Club #6735 PO Box 1107 Middletown, CT 06457 http://www.middletownrotary.org/</p>	<p>The Middletown Rotary Club is an organization of business and professional leaders who provide humanitarian service, Rotarians develop community service projects that address many critical issues, such as illiteracy, children at risk, poverty and hunger, the environment, and violence.</p>

<p>St. Vincent de Paul Middletown 617 Main Street Middletown, CT 06457 (860) 344-0097 http://www.svdmiddletown.org/</p>	<p>Mission: Meeting needs and offering hope. A community triage center. Services and community support that includes a soup kitchen; Amazing Grace Food Pantry (16 Stack Street); supportive housing program; community support services including referral to needed programs; provides postal delivery for the homeless; runs Operation Fuel for Middlesex County; provides a Rep payee program.</p>
<p>United Way Connecticut 2-1-1 Dial 2-1-1 or dial (800) 203-1234.or search online. Or, search online https://www.211ct.org/</p>	<p>2-1-1 is one-stop connection to the local needed services from utility assistance, food, housing, child care, after school programs, elder care, crisis intervention and much more. 2-1-1 is always ready to assist in finding needed help.</p>

Community Advocacy Groups & Coalitions

Organization Information	Brief Description
<p>The Coalition on Housing + Homelessness c/o Middlesex United Way 100 Riverview Center, Suite 230 Middletown, CT 06457 (860) 346-8695 https://growstrongct.org/</p>	<p>The Coalition on Housing and Homelessness strives to end all types of homelessness in Middlesex County, Meriden, and Wallingford by increasing access to stable and affordable housing, ensuring individuals and families are able to secure shelter, and by increasing collaboration and civic engagement to address housing issues in our region.</p> <p>Committees:</p> <ul style="list-style-type: none"> ● Communications and Advocacy Committee ● Housing Committee ● LEADers Committee ● Prevention Committee ● CAN - Coordinated Access Network
<p>Middlesex County Asthma Coalition c/o Center for Chronic Care Management Middlesex Hospital 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org</p>	<p>A community collaborative that works together to address areas of identified asthma need with a focus on those who are most at-risk.</p>
<p>Middlesex County Branch NAACP P.O. Box 378 Middletown, CT 06457 (860) 343-9467</p>	<p>The mission of the National Association for the Advancement of Colored People (NAACP) is to ensure the political, educational, social, and economic equality of rights of all persons and to eliminate race-based discrimination.</p>
<p>Middlesex County Branch NAACP Health Committee P.O. Box 378 Middletown, CT 06457 (860) 343-9467</p>	<p>The mission of the Middlesex County Branch NAACP Health Committee is to promote, protect and maintain the health and well-being of Black/African Americans, Latinos and all people of color in Middlesex County by assessing health needs and advocating for health equity in order to achieve positive health outcomes. The Health Committee’s vision is a nation where all people are free from the racial and ethnic inequities that undermine optimal health and quality of life.</p>
<p>Middlesex County Branch NAACP WIN (Women in the NAACP) P.O. Box 378</p>	<p>The Women in the NAACP (WIN) seeks to enhance the leadership role of women, serve as an advocacy vehicle for issues affecting women and children, and advocate for the</p>

<p>Middletown, CT 06457 (860) 343-9467</p>	<p>positive development of children. WIN's theme is "Outstretched Hands and Open Hearts to Women and Children."</p>
<p>Middlesex County Community Care Team c/o Middlesex Hospital, Behavioral Health 28 Crescent Street Middletown, CT 06457 (860) 358-8825 https://middlesexhealth.org</p>	<p>A collaborative of behavioral health providers, community based organizations and social services that work together to provide patient-centered care and improve outcomes by developing wrap-around services through multi-agency partnership and care planning for individuals experiencing mental health issues or substance use disorders.</p>
<p>Middletown Ministerial Alliance New Jerusalem Christian Center Church 47 Norfolk Street Middletown, CT 06457 (860) 343-0115 https://www.njccchurch.com/</p>	<p>An alliance of interdenominational churches in Middletown, where pastors work together to share ideas and address issues facing the community.</p>
<p>Middletown Racial Justice Coalition Middletown, CT https://www.facebook.com/groups/156407201527724/</p>	<p>Created so that Middletown can join in working toward Racial Justice for all. A place to share ideas, strategies, opportunities, events, and community. It is intended to be as inclusive, diverse, and multidimensional as possible.</p>
<p>Ministerial Health Fellowship Cross Street AME Zion Church 440 West St, Middletown, CT 06457 (860) 344-9527 https://www.crossstreetamezion.org/</p>	<p>A program under the Cross Street Training & Academic Center Inc. (CSTAC). The Ministerial Health Fellowship was formed as a faith-based healthcare advocacy network of Black pastors and church leaders from the Middletown, New Britain and Hartford areas with the purpose of building knowledge of healthcare issues, advocating for health equity and forging connections with healthcare providers and public officials in order to reduce health disparities for communities of color.</p>
<p>North End Action Team 654 Main Street Middletown, CT 06457 (860) 346-4845 neat@neatmiddletown.org http://neatmiddletown.org/</p>	<p>The North End Action Team (NEAT) is a community-based organization whose mission is to empower residents and stakeholders to participate in and advocate for the interests of the North End neighborhood within Middletown. The purpose of NEAT is to provide an organizational structure from which to identify compelling neighborhood concerns; encourage participation among residents/stakeholders; identify and develop indigenous leadership; initiate grassroots advocacy; effect solutions to neighborhood issues, and; develop resources.</p>
<p>Westbrook Economic Action Initiative Westbrook, CT Businesses interested in participating in the WEAI may contact Leslie Carson at lcarson@westbrookctschools.org</p>	<p>An initiative focused on working with low-income earners by improving access to training, job opportunities, and increased wages. Also works to provide training opportunities for young people to assist with securing competitive jobs in the future.</p>

Child, Youth, Parenting and Family Advocacy & Resources

Organization Information	Brief Description
<p>Community Resilience Collaborative of Middlesex County (CRC) https://www.acesconnection.com/g/community-resilience-collaborative-ct</p>	<p>A resource for Adverse Childhood Experiences (ACEs). A platform for community members, leaders and parents who are passionate about preventing trauma & building resilience. Provides sharing of information, exchanging ideas and working collaboratively across sectors to develop solutions that support trauma-informed and resilience-building practices in all domains of life and work.</p>
<p>Middlesex Coalition for Children Through the Middlesex County United Way 100 Riverview Center, Suite 230 Middletown, CT 06457 (860) 558-2041 www.middlesexchildren.org</p>	<p>An alliance of parents, educators, children’s service providers and community activists dedicated to improving the lives of children in Middlesex County. The Coalition forms task forces on issues to mobilize the community to take action; and advocates for children's issues and also plans, coordinates, and supports a wide variety of initiatives to improve children's services in Middlesex County.</p>
<p>Middletown Family Resource Centers Farm Hill School Family Resource Center 372 Hunting Hill Avenue Middletown, CT 06457 (860) 854-6030 https://www.middletownschools.org/departments/family_resource_center</p>	<p>Offers a variety of youth positive youth development programs and activities.</p> <p>Eligibility: Resident of Middletown</p>
<p>Opportunity Knocks 28 Crescent Street Middletown, CT, 06457 (860) 833-2365 monica.belyea@midhosp.org</p>	<p>Opportunity Knocks for Middletown's Young Children is a collective impact model community collaborative of more than 50 health, education and parent/community partners. OK creates and promotes policies and strategies that align with a commitment to undo systemic racism and oppression in order to achieve equitable, sustainable, early childhood health and education systems. Envisions that ALL Middletown children enter kindergarten physically and emotionally healthy and ready for school success. All are welcome to participate in the meetings and work groups.</p>
<p>Project Reach Women and Families Center-Sexual Assault Crisis Service-Middletown Satellite 100 Riverview Center, Suite 150 Middletown CT 06457 (203) 213-8667 http://www.womenfamilies.org/</p>	<p>Project REACH provides outreach to youth in Meriden, Wallingford and Middlesex County, ages 13 through 24 who have runaway, are homeless, at-risk for homelessness, and youth at risk for sexual exploitation or abuse.</p>

Disability Services

Organization Information	Brief Description
<p>Kuhn Middletown Employment Opportunities 100 Plaza Middlesex Middletown, CT 06457 (860) 347-8923</p>	<p>Mission: Develop quality person-centered services through meaningful employment opportunities that provide people with disabilities, the skills and support necessary to become independent, gain self-esteem and be productive and valued members of the community.</p>

<p>http://www.kuhngroup.org/</p> <p>Kuhn Meriden - Main Campus 1630 North Colony Road Meriden, CT 06450 (203) 235-2583</p>	
<p>MARC Administrative Office 124 Washington St. Middletown, CT 06457 (860) 342-0700 https://www.marccommunityresources.org/</p>	<p>MARC's vision is to empower people with Intellectual and Developmental Disabilities (I/DD) to make their own life choices and aid in the fulfillment of their dreams - through employment, housing, social, and community involvement and advocacy. MARC focuses on choice and empowerment and supporting people through their lives as they make these choices and continue to grow and thrive.</p>
<p>SARAH Inc 1620 Boston Post Road Westbrook, CT 06498 (860) 399-1888</p> <p>51 Boston Post Road, Unit 1 Madison, CT 06443 (203) 318-5206 http://sarah-inc.org/</p>	<p>SARAH provides programs and services for people with intellectual and other disabilities who live in Connecticut. Its mission is to enrich the lives of all individuals with differing abilities. SARAH Inc. services and supports include: Birth to Three Early Intervention, Enrichment Activities, Customized Employment, Individual and Family Supports, School to Work Transition Services, Advocacy, and more.</p>
<p>State of Connecticut Disability Services Social Security Office 425 Main St, 3rd Floor Middletown, CT 06457 (800) 772-1213 https://portal.ct.gov/DSS/Health-And-Home-Care/Disability-Services/Disability-Services</p>	<p>The Department of Disability Services administers programs which promote social, physical and economic well-being while providing people with disabilities with opportunities to achieve their full potential for self-direction.</p>
<p>Vista Life Innovations Two locations: 1) 1356 Old Clinton Road, Westbrook, CT 06498 2) 107 Bradley Board, Madison, CT 06443 (860) 399-8080 https://www.vistalifeinnovations.org/</p>	<p>Vista Life is a full-service organization supporting individuals with disabilities throughout the various stages of life. Programs and services include community-based transition programming, employment services, advocacy services, arts programming, recreational programming, benefits counseling, assessment services and a summer program for prospective students.</p>

Educational Resources, Training & Post-Secondary Educational Institutions

Organization Information	Brief Description
<p>CT Pathways Connecticut's SNAP Employment & Training Program Middlesex Community College (MxCC) 100 Training Hill Road Middletown, CT 06457 (860) 343-5782</p> <p>MxCC @ Platt 220 Coe Avenue Meriden, CT 06451</p>	<p>The employment and training program provides SNAP recipients with career training, mentoring, and support services to prepare them for job opportunities in the fields of allied health and other fields. Middlesex Community College is pleased to offer SNAP recipients access to federally-funded scholarships, which are administered through the state's department of social services (DSS), to attend one of these career training programs.</p>

<p>Holy Apostles College & Seminary 33 Prospect Hill Road Cromwell, CT 06416 (860) 632-3010 https://holypostles.edu/</p>	<p>Holy Apostles College and Seminary offers a faithfully Catholic, 100% online and on-campus liberal arts degree program for undergraduate students, as well as 100% online graduate degree programs in Philosophy, Theology, and Pastoral Studies.</p>
<p>Middlesex Community College (MxCC) 100 Training Hill Road Middletown, CT 06457 (860) 343-5719 https://mxcc.edu/</p> <p>MxCC @ Platt 220 Coe Avenue Meriden, CT 06451</p>	<p>Students can choose from over 70 degree and certificate programs. Students may complete an associate degree, the first two years of a bachelor's degree, build career skills, update their marketability and skill sets for a competitive edge in the workforce, and pursue their life goals through higher education.</p>
<p>Middletown Adult Education 398 Main Street Middletown, CT 06457 (860) 343-6044 https://www.maect.org/</p> <p>Other locations: 1) 210 Main Street, Old Saybrook, CT 2) Killingworth Library, 301 Route 81, Killingworth, CT 3) Griswold Middle School, 144 Bailey Road, Rocky Hill, CT</p> <p>These academic programs are free of charge to residents of the following towns: Middletown, Cromwell, Durham, Middlefield/Rockfall, Deep River/Chester/Essex, Centerbrook/Ivoryton, East Haddam/Moodus, East Hampton, Haddam/Higganum/Killingworth, Old Saybrook, Portland, Rocky Hill, Westbrook, Madison.</p>	<p>Day and evening classes at a variety of regional locations support efforts to get a high school diploma, master the English language and other skills and earn citizenship. Academic classes are free and offer flexible scheduling to meet individuals' unique needs. Academic offerings include:</p> <ul style="list-style-type: none"> ● Online Learning ● Adult High School - Credit Diploma Program (AHS-CDP) ● ESL & U.S. Citizenship Programs ● GED Program ● Adult Basic Skills Program ● Family Learning
<p>Middlesex Institute for Lifelong Education (MILE) Middlesex Community College (MxCC) 100 Training Hill Road Middletown, CT 06457 (860) 343-5863 https://mxcc.edu/ce/lifelong-learning/</p>	<p>The Middlesex Institute for Lifelong Education (MILE) is a group of adults (age 50+) interested in expanding their knowledge by attending a program of diverse offerings. Most courses are held on the Middletown campus, and programs are enhanced by field trips. Middlesex Community College founded the group in 1993 and still acts as its sponsor.</p> <p>MILE classes take place during the fall (October to November) and spring (March to April) semesters. For only \$75/year, members are entitled to attend as many MILE courses as they choose.</p>
<p>Porter and Chester Institute 30 Waterchase Drive Rocky Hill, CT 06067 (860) 529-2519 https://porterchester.edu/about-pci</p> <p>Areas of study include:</p> <ul style="list-style-type: none"> ● Automotive Technology ● Computer & Network Technology ● Computer-Aided Drafting & Design (CADD) ● Cosmetology ● Dental Assisting ● Medical Assisting 	<p>Mission is to support committed students in achieving the technical and professional skills essential for their chosen career through industry-modeled, student-centered education and training.</p> <p>Areas of study include: (continued_</p> <ul style="list-style-type: none"> ● Medical Billing and Coding ● Practical Nursing ● Electrician (Industrial, Commercial and Residential) ● Electronics Systems Technician ● HVACR (Heating, Ventilation, Air Conditioning and Refrigeration) ● Plumbing

<p>Side Street to Main Street Business & Leadership Development Program Middlesex County Chamber of Commerce 393 Main Street Middletown, CT 06457 (860) 347-6924 https://www.middlesexchamber.com/pages/SideStreettoMainStreetProgram</p>	<p>Facilitated by the Essex Group. A one year long entrepreneurial and business development course, with a rigorous curriculum, designed to assist minority small business owners in the community who have not had formal business training to become more successful by developing the attitudes, skills and qualities necessary for effective business ownership and success, taking them from the Side Street to the Main Street of the business community. Classes are held at the Chamber offices. Because Aetna, Inc. provides a generous Grant, there is no charge for qualified participants.</p>
<p>STEAM Train Fast Track Academy - Young adults/Adults P.O. Box 2321 Middletown, CT 06457 (860) 398-9061 https://www.steamtraininc.org/</p>	<p>A 16-week workforce development program that is designed to offer underserved and unskilled individuals, especially those who are single parents with dependent children, opportunities to develop skills for the STEM (science, technology, engineering, and math) workplace.</p> <p>STEAM Train is a non-profit organization that is committed to moving generations, especially underserved, under resourced, and underrepresented populations, to careers in science, technology, engineering, mathematics, and beyond.</p>
<p>Wesleyan University 45 Wyllys Avenue Middletown, CT 06459 (860) 685-2000 https://www.wesleyan.edu/</p>	<p>A private, coeducational, non-sectarian school of liberal arts and sciences, offering undergraduate, graduate and PhD degree programs.</p>

Employment Services

Organization Information	Brief Description
<p>A R Mazzotta Employment Specialists 160 Broad Street Middletown, CT 06457 (860) 347-1626 http://www.armazzotta.com/</p>	<p>CT staffing agency that provides personal employment services. Office locations in Middletown, Wallingford, Watertown and Westbrook.</p>
<p>CoWorx Staffing Agency 51 Winthrop Road Chester, CT 06412 (860) 526-4357 extension 2253 https://www.coworxstaffing.com/</p>	<p>Serving job seekers and employers in Chester, East Haddam, Colchester, Cromwell, Old Saybrook, Guilford, and the surrounding areas.</p>
<p>Emergency Resource Management PO Box 911 1116 Portland-Cobalt Road (Rt 66) Portland, CT 06480 (860) 342-0902 http://ermanagement.com/</p>	<p>Employment agency for volunteer EMS staff.</p>
<p>Kuhn Middletown Employment Opportunities 100 Plaza Middlesex Middletown, CT 06457 (860) 347-8923</p>	<p>Mission: Develop quality person-centered services through meaningful employment opportunities that provide people with disabilities, the skills and support necessary to become independent, gain self-esteem and be productive and valued members of the community.</p>

<p>http://www.kuhngroup.org/</p> <p>Kuhn Meriden - Main Campus 1630 North Colony Road Meriden, CT 06450 (203) 235-2583</p>	
<p>MARC Administrative Office 124 Washington St. Middletown, CT 06457 P: 860-342-0700 F: 860-342-1492 https://www.marccommunityresources.org/</p>	<p>MARC's vision is to empower people with Intellectual and Developmental Disabilities (I/DD) to make their own life choices and aid in the fulfillment of their dreams - through employment, housing, social, and community involvement and advocacy. MARC focuses on choice and empowerment and supporting people through their lives as they make these choices and continue to grow and thrive.</p>
<p>Middletown WORKS! Middletown, CT (860) 675-5405 https://middletownworks.org/</p>	<p>Middletown WORKS! is part of the Working Cities Initiative. It is a collaborative of 30 partners led by The Connection, Inc., Middlesex United Way and the Connecticut Center for Advanced Technology (CCAT). Its vision is to increase prosperity and reduce poverty for Middletown single parent families living at or below the Federal Poverty Level.</p>
<p>PeopleReady 64 Washington Street Middletown, CT 06457 (860) 704-0359 https://www.peopleready.com/locations/middleton-ct-2272</p>	<p>Employment agency that provides expertise in flexible, industry-specific solutions for construction, hospitality, manufacturing and logistics, marine, transportation, warehousing and distribution, waste and recycling, and many other industries.</p>
<p>SARAH, Inc. 1620 Boston Post Road, Suite 200 Westbrook, CT 06498 (860) 399-1888 http://www.sarah-inc.org/</p>	<p>Our mission is to enrich the lives of all individuals with differing abilities. SARAH Inc. services and supports include: School to Work Transition Services, and more.</p>
<p>Southeastern Employment Services 7 Halls Road, Unit C Old Lyme, CT 06371 (860) 434-0544 http://sesct.org/</p>	<p>A company committed to providing individualized employment services for people with barriers to employment. Made up of dedicated professionals with expertise in autism, developmental disabilities, and mental and physical health challenges.</p>
<p>TEK Systems 500 Enterprise Drive Suite 4C Rocky Hill, CT 06067 (860) 906 - 5400 http://www.teksystems.com</p>	<p>Employment agency focusing on IT staffing.</p>
<p>Workforce Alliance Middletown American Job Center 272 South Main Street Middletown, CT 06457 (860) 347-7691 (203) 624-1493 ext 210 (VOICE/TTY) https://www.workforcealliance.biz/youth-and-young-adults/summer-youth-employment/</p>	<p>Program partners with community based agencies to provide positive youth development for in-school and out-of-school youth that results in employment or leads to post-secondary education.</p> <p>Eligibility: Youth programs are for ages 14 through 21 who are low income AND who have at least one barrier to employment. Barriers to employment for youth include low literacy, high school dropout, teen parent, judicial offender, runaway, or other specified barrier. A small percentage are not subject to income restrictions.</p>

	<p>Service Area: Chester, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Haddam, Killingworth, Middlefield, Middletown, Old Saybrook, Portland, Westbrook, Madison, Lyme, Old Lyme, Meriden.</p>
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Food Assistance – Food Pantries & Food Distribution

Organization Information		
<p>Amazing Grace Food Pantry St. Vincent de Paul Middletown 16 Stack Street Middletown, CT 06457 (860) 347-3222 http://www.svdmiddletown.org/food-pantry/</p>	<p>All People Community Outreach Ministry 56 Warwick Street, Middletown, CT, 06457 (860) 301-0299</p>	<p>Chester, Town of - Social Services 203 Middlesex Avenue, Chester, CT 06412 (860) 526-0013, ext 213</p>
<p>Colchester, Town of - Food Pantry 127 Norwich Avenue, Colchester, CT 06415 (860) 537-7255 https://www.colchesterct.gov/youth-social-services/pages/food-bank</p>	<p>CT Food Bank - Mobile Pantry, Cross Street A.M.E. Zion Church 440 West Street Middletown, CT 06457 (203) 741-9751 http://www.ctfoodbank.org/get-help/connecticut-food-banks-mobile-pantry-schedule/</p>	<p>Cromwell, Town of - Food Pantry 41 West Street, Cromwell, CT 06416 (860) 632-3449 https://www.cromwellct.com/human-services/pages/food-pantry</p>
<p>East Haddam Youth and Family Services Food Bank 488 Town Street, East Haddam, CT 06423 (860) 873-3296 or (860) 891-8100 http://www.easthaddam.org/Food-Bank/</p>	<p>East Hampton, Town of - Foodbank 43 West High Street, East Hampton, CT 06424 (860) 365-5978 https://www.easthamptonct.gov/social-services/food-bank</p>	<p>Estuary District Food Program - Shoreline Pantries PO Box 804 Essex, CT 06426 (860) 388-1988 https://shorelinesoupkitchens.org/</p>
<p>First Church of Christ Congregational Food Pantry 55 Church Road Clinton, CT 06413 (860) 669-5735 https://shorelinesoupkitchens.org/get-help-2/first-church-of-christ-clinton</p>	<p>First Church of Christ Congregational Food Pantry 366 Main Street Old Saybrook, CT 06475 (860) 388-3008 https://shorelinesoupkitchens.org/get-help-2/first-church-of-christ</p>	<p>First Congregational Church of Old Lyme Food Pantry and Soup Kitchen 2 Ferry Road Old Lyme, CT 06371 (860) 434-8686</p>
<p>Heaven's Storehouse Food Pantry - Middletown/Portland Seventh-Day Adventist Church, 13 Waverly Place, Portland, CT 06480 (860) 342-0141</p>	<p>Hebron Interfaith Human Services Food Pantry 20 Pendleton Drive Hebron, CT 06248 (860) 228-1681 http://www.hihst.org/</p>	<p>Hinka's Cupboard Saint Francis of Assisi Parish, 10 Elm Street Middletown, CT 06457 (860) 301-5035 https://www.saintfrancisofassisi.com/foodpantry/</p>
<p>Marlborough, Town of - Foodbank 3 Wilhengerr Drive Marlborough, CT 06447 (860) 295-6008 or (860) 295-6204 http://www.foodbankofmarlborough.org/</p>	<p>Portland Food Pantry 7 Waverly Place, Portland, CT 06480 (860) 342-6795</p>	<p>Shiloh Baptist Church Food Pantry 346 Butternut Street, Middletown, CT, 06457 (860) 346-8295</p>

<p>St. Mark's Roman Catholic Church Food Pantry 222 McVeagh Road Westbrook, CT 06498 (860) 399-9207 https://shoresoupkitchens.org/get-help-2/st-marks-church</p>	<p>The Salvation Army Middletown Corps Community Center 515 Main Street, Middletown, CT, 06457 (860) 347-7493</p>	<p>Westbrook Food Pantry Shoreline Soup Kitchens & Pantries St Mark's Parish 222 McVeagh Road Westbrook, CT 06498 (860) 388-1988 https://shoresoupkitchens.org/get-help-2/st-marks-church</p>
<p>Zion First Baptist Church Food Pantry 16 James A. Moses Avenue Middletown, CT, 06457 (860) 347-5074</p>		

Food Assistance – Soup Kitchens

Organization Information		
<p>Deep River Congregational Church Soup Kitchen 1 Church Street Deep River, CT 06417 (860) 526-5045 https://shoresoupkitchens.org/get-help-2/deep-river-congregational</p>	<p>The First Baptist Church Soup Kitchen 10 Prospect Street Essex, CT 06426 (860) 767-8623 https://shoresoupkitchens.org/get-help-2/baptist-church-of-essex</p>	<p>First Congregational Church of Old Lyme Food Pantry and Soup Kitchen 2 Ferry Road Old Lyme, CT 06371 (860) 434-8686 Soup Kitchen Hours: Saturdays 9am-10am</p>
<p>Grace Episcopal Church Soup Kitchen 336 Main Street Old Saybrook, CT 06475 (860) 388-0895 https://www.shoresoupkitchens.org/get-help-2/grace-episcopal-church</p>	<p>Shoreline Soup Kitchens Multiple sites and times call for information (860) 388-1988 https://www.shoresoupkitchens.org/index.php</p>	<p>St Andrew Community Lunch Program - St. Andrew Church 128 Norwich Ave Colchester, CT 06415 (860) 537-5189 and (860) 537-2355 https://www.standrewcolchester.org/community-free-lunch-program</p>
<p>St. John's Episcopal Church Soup Kitchen 23 Main Street Essex, CT 06426 (860) 767-8095 https://www.shoresoupkitchens.org/get-help-2/st-johns-episcopal-church</p>	<p>St. Vincent de Paul Middletown Soup Kitchen 617 Main Street Middletown, CT 06457 (860) 344-0097 http://www.svdmiddletown.org/meals/</p>	<p>Trinity Lutheran Church Soup Kitchen 109 Main Street Centerbrook, CT 06409 (860) 767-0228 https://shoresoupkitchens.org/get-help-2/trinity-lutheran-church</p>
<p>United Church of Chester Soup Kitchen 29 West Main Street Chester, CT 06412 (860) 526-2697 https://shoresoupkitchens.org/get-help-2/united-church-of-chester</p>	<p>United Methodist Church Soup Kitchen 12 Commerce Street Clinton, CT 06413 (860) 669-8396 https://shoresoupkitchens.org/get-help-2/united-methodist-church</p>	

Food Assistance – Home Delivered Meals

Organization Information		
<p>Community Renewal Team (CRT) - Meals on Wheels 555 Windsor Street Hartford, CT 06120 (860) 560-5828 http://www.crtct.org/en/need-help/senior-services/meals-on-wheels <i>Serves Middlesex, Tolland and Hartford Counties</i></p>	<p>CW Resources - Meals on Wheels 200 Myrtle Street New Britain, CT 06053 (860) 229-7700, ext 298 https://www.cwresources.org/lines-of-business/food-services/ <i>Towns Served: Colchester, Cromwell and Middletown</i></p>	<p>Estuary Council of Seniors Meals-on-Wheels 220 Main Street Old Saybrook, CT 06475 (860) 388-1611 https://www.ecsenior.org/services/nutrition</p>

Food Assistance – Farmer’s Markets (Offering Support)

Organization Information		
<p>CT Department of Agriculture Farmers’ Market Program:</p> <p>Senior Farmers’ Market Nutrition Program (SFMNP) - SFMNP check booklets are issued to municipal agents, elderly nonprofits, or senior centers for distribution to eligible participants.</p> <p>Each eligible participant receives one (1) \$18 check booklet annually containing six (6) three dollar (\$3) checks.</p> <p>SFMNP checks can be redeemed at FMNP authorized locations in CT for fruits, vegetables, fresh cut herbs, and honey.</p> <p>https://portal.ct.gov/DOAG/ADaRC/ADaRC/WIC-and-Senior-Farmers-Market-Nutrition-Program</p>	<p>CT Department of Agriculture Farmers’ Market Program:</p> <p>WIC Farmers’ Market Nutrition Program (FMNP) - WIC FMNP check booklets are distributed through WIC agencies.</p> <p>Provides one (1) \$15 check booklet consisting of five (5) \$3 checks to participants of Women, Infants and Children (WIC) who are identified as “nutritionally at risk,” to buy fresh fruits, vegetables, and cut herbs at FMNP authorized locations.</p> <p>https://portal.ct.gov/DOAG/ADaRC/ADaRC/WIC-and-Senior-Farmers-Market-Nutrition-Program</p>	<p>North End Farmers Market Middletown, CT 06457 Sidewalk in front of It’s Only Natural Market 575 Main Street Middletown, CT 06457</p> <p>EBT/SNAP Accepted SNAP Doubled WIC & Senior Vouchers Doubled June - October https://www.northendfarmersmarket.org/</p>

Food Assistance – Additional Resources

Organization Information	Brief Description
<p>Community Renewal Team (CRT) Food Assistance Programs CRT Resource Center 44 Hamlin Street Middletown, CT 06457 (860) 347-4465 http://www.crtct.org/en/need-help/basic-needs/basic-needs-food</p>	<p><i>Are you hungry? CRT helps individuals and families, children and seniors find healthy food</i></p> <p>CRT has food programs to help people in Middlesex and Hartford counties. Many Connecticut people are fed through these food assistance programs including thousands of children and seniors each year. CRT Resource Centers distribute up to three days of food to individuals and families. Call to see if food is available.</p>

<p>Community Renewal Team (CRT) Meals on Wheels 555 Windsor Street Hartford, CT 06120 To start the process, contact a Home Care Manager at (860) 560-5825 MealsonWheels@crtct.org or http://www.crtct.org/en/need-help/basic-needs/basic-needs-food</p>	<p>Healthy lunches and dinners delivered to homebound seniors. Homebound seniors can receive healthy lunches and dinners delivered to their door. After referrals are placed, hot lunches and cold suppers will be delivered within 48 hours. Weekend meals are delivered on Fridays. Special diets and textures are available. A \$2.50 donation per meal is suggested to help cover costs. However, no one is denied a meal if unable to pay. To Apply: Participants must be 60 years of age or older; be unable to eat at a community meal site; be assessed by staff as 'homebound'.</p>
<p>Community Renewal Team (CRT) Summer Food Program for Children CRT Resource Center 44 Hamlin Street Middletown, CT 06457 (860) 347-4465 SummerFood@crtct.org or http://www.crtct.org/en/need-help/basic-needs/basic-needs-food</p>	<p><i>Children enjoy free healthy breakfast, snacks and lunch at summer meal programs</i> CRT provides free healthy, delicious breakfasts, lunches and snacks for children and parents or caretakers in some locations in Colchester, Enfield, Glastonbury, Middletown, Portland and Windsor Locks during the summer. Most drop-in sites are open from June 20 through August 19. Times and meals vary by site. Children must be 18 years or younger to receive a free meal or snack. Fun supervised activities and crafts are offered at some sites.</p>
<p>End Hunger Connecticut! 65 Hungerford Street Hartford, CT 06106 (860) 560-2100 http://www.endhungerct.org/</p>	<p>A statewide anti-hunger and food security organization. By focusing on advocacy, outreach, education and research, EHC! serves as a comprehensive anti-hunger resource for policymakers, community organizations, and low-income families.</p>
<p>Middletown Community Thanksgiving Project Email for more information: mctp2013@yahoo.com</p>	<p>The Middletown Community Thanksgiving Project is an initiative that brings together volunteers from a variety of groups and businesses to purchase and assemble baskets of food for families who cannot otherwise afford Thanksgiving feasts. The baskets include a turkey, a pie, and all the ingredients to prepare a holiday meal.</p>
<p>Supplemental Nutrition Assistance Program (SNAP) CT Department of Social Services Beneficiaries who would like more information may call 2-1-1 (toll-free) http://www.ct.gov/https://portal.ct.gov/DSS/SNAP/Supplemental-Nutrition-Assistance-Program---SNAPdss/site/default.asp</p>	<p>The Supplemental Nutrition Assistance Program (SNAP), formerly known as Food Stamps, helps eligible individuals and families afford the cost of food at supermarkets, grocery stores and farmers' markets.</p>
<p>Women, Infants, and Children (WIC) Program at Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-4070 https://middlesexhealth.org/wic-program http://www.fns.usda.gov/wic/women-infants-and-children-wic</p>	<p>WIC, the Women, Infants and Children Program is a nutrition program that helps pregnant women and families with babies and young children eat well and stay healthy.</p>

Health Departments

Organization Information	Organization Information
<p>Chatham Health District 240 Middletown Avenue, Unit 123 East Hampton, CT 06424 (860) 365-0884 http://chathamhealth.org/ <i>Serves the towns of:</i> Colchester, East Haddam, East Hampton, Hebron, Marlborough, Portland</p>	<p>Connecticut River Area Health District (CRAHD) Saybrook Junction 455 Boston Post Road, Suite 7 Old Saybrook, CT 06475 (860) 661-3300 http://www.crahd.net/ <i>Serves the towns of:</i> Chester, Clinton, Deep River, Haddam, Old Saybrook</p>
<p>Cromwell Health Department Town Hall 41 West Street Cromwell, CT 06416 (860) 632-3426 http://www.cromwellct.com/health-department <i>Serves the town of:</i> Cromwell</p>	<p>Durham Health Department 30 Town House Road P.O. Box 428 Durham, CT 06422 (860) 349-8253 http://www.townofdurhamct.org/content/28562/27556/27707/ <i>Serves the town of:</i> Durham</p>
<p>Essex Health Department 29 West Avenue Essex, CT 06426 (860) 767-4340 http://www.essexct.gov/health-department <i>Serves the town of:</i> Essex</p>	<p>Town of Killingworth Health Department 323 Route 81 Killingworth, CT 06419 (860) 663-1765 ext 223 http://www.townofkillingworth.com/offices/health.html <i>Serves the town of:</i> Killingworth</p>
<p>Ledge Light Health District 216 Broad Street New London, CT 06320 (860) 445-2000 https://llhd.org/ <i>Serves the towns of:</i> Lyme, Old Lyme (also: East Lyme, Groton, Ledyard, New London, North Stonington, Stonington, Waterford)</p>	<p>Plainville-Southington Regional Health District 196 North Main Street Southington, CT 04689 (860) 276-6275 http://www.southington.org/content/17216/17438/default.aspx <i>Serves the towns of:</i> Middlefield (also, Plainville, Southington)</p>
<p>Middletown Health Department 245 deKoven Drive Middletown, CT 06457 (860) 638-4960 http://www.cityofmiddletown.com/167/Health-Department <i>Serves the town of:</i> Middletown</p>	<p>Westbrook Health Department 866 Boston Post Road Westbrook, CT 06498 (860) 399-9869 https://westbrookct.us/152/Public-Health <i>Serves the town of:</i> Westbrook</p>

Housing – Supports for the Housing Insecure

Organization Information	Brief Description
Emergency Shelter	
<p>Shelters Callers in need of shelter must call 2-1-1 for a referral</p>	<p>In Connecticut, the 2-1-1 system is the “front door” through which individuals or families who are homeless or at imminent risk of becoming homeless access the regional Coordinated Access Network (CAN), which is a system to assess and assign housing assistance and supports to those in</p>

	the midst of a housing crisis. Middletown is part of the Meriden-Middletown-Wallingford three town region CAN.
Warming Center For dates of operation, locations, or for more information, call (860) 344-0097 Ext. 11 (Middletown Health Department)	When open, the city's warming centers are open to the public 7 days a week from 9pm until 7am. Although not a shelter, the warming center provides snacks, beverages, and a temporary respite from the cold for those in need.
Project REACH Youth Shelter (203) 235-9297, ext. 121 or 133 <i>24 Hour Hotline</i> (203) 213-8667 voice/text <i>Middletown Outreach</i> (860) 759-8430 voice/text <i>Meriden Outreach</i> (203) 427-5778 voice/text	Provides temporary housing, up to 21 days, for runaway and homeless youth ages 13-17. Contact can be made with shelter staff 24/7 by either calling or texting the designated cell phone.
Supportive House (Access Through the Coordinated Access Network)	
Supportive Housing - General Callers need to call 2-1-1 for questions about supportive housing; if appropriate, people can be added to a housing registry.	In Connecticut, the 2-1-1 system is the "front door" through which individuals or families who are homeless or at imminent risk of becoming homeless access the regional Coordinated Access Network (CAN), which is a system to assess and assign housing assistance and support to those in the midst of a housing crisis. Middletown is part of the Meriden-Middletown-Wallingford three town region CAN.
Columbus House - Access through the CAN 282 Main Street Ext. Middletown, CT 06457 (855) 626 3310	Access through 2-1-1 Coordinated Access Network (CAN) system. Provides supportive housing services, including case management.
Shepard Home – Access through the CAN Administered by Columbus House Inc. 282 Main Street Ext. Middletown, CT 06457	Access through 2-1-1 Coordinated Access Network (CAN) system. Located at 112 Bow Lane in Middletown, CT. 32 units of permanent supportive housing with a preference for Veterans experiencing homelessness.
St. Vincent de Paul, Middletown - Access through the CAN 617 Main Street Middletown, CT 06457 (860) 344-0097 http://www.svdmiddletown.org/	Access through 2-1-1 Coordinated Access Network (CAN) system. Provides supportive housing services, including case management.
Additional Resources	
Housing Authority - 2 locations Middletown: 40 Broad Street Middletown, CT 06457 (860) 346-8671 http://middletownha.org/ Portland: 9 Chatham Court, Portland, CT 06480 (860) 342-1688	Operates housing for elderly, non-elderly disabled persons and for families that meet the low and moderate income criteria for the federal and state programs.
Middlesex YMCA Men's Residence – Schwarz Residence 99 Union Street Middletown, CT 06457	Middlesex YMCA operates a residence for men. Comprised of sixty-two single occupancy non-smoking rooms, the Schwarz Residence is designed for single working men interested in short or long term housing. All rooms are simply furnished,

<p>(860)-343-6212 http://www.midymca.org/</p> <p>** YMCA membership is required for residence</p>	<p>carpeted, and include a small refrigerator. Residents share common bathroom/shower facilities. There is a laundry room as well as a small lounge with a sink and microwave oven for resident use. Room rates vary by size; rates include weekly light housekeeping including linens, and daily towel service.</p>
<p>Advocacy: Middlesex County Coalition on Housing & Homelessness c/o Middlesex United Way 100 Riverview Center, Suite 230 Middletown, CT 06457 (860) 346-8695 http://anendinten.org/</p>	<p>Mission: To prevent and end homelessness in Middlesex County by 2018. A coalition of community leaders representing non-profits, government, faith groups, and businesses. Formed to implement the Middlesex County Ten Year Plan to End Homelessness and has several committees that work towards this objective.</p>

Housing - Additional Supports

Organization Information	Brief Description
<p>Connecticut Renters' Rebate for Elderly/Disabled Renters Program Hotline: (860) 418-6377 Call for more information https://portal.ct.gov/OPM/IGPP-MAIN/Grants/Tax-Relief-Grants/Renters--Rebate-For-ElderlyDisabled-Renters-Tax-Relief-Program</p> <p>**Applicant may have rented elsewhere in Connecticut for all or some portion of the year preceding the year of filing, but must file in the town in which they reside, during the filing period.</p> <p>Note: Application may be made at the town social service agency, or the Assessor's Office, depending on the town, between April 1st and October 1st.</p>	<p>State law provides a reimbursement program for Connecticut renters who are elderly or totally disabled, and whose incomes do not exceed certain limits.</p> <p>Eligibility:</p> <ul style="list-style-type: none"> • Recipient or spouse must be 65 years of age, or older, • or be 50 years of age or older and the surviving spouse of a renter who at the time of the renter's death had qualified and was entitled to tax relief provided such spouse was living with such renter at the time of the renters' death, • or 18 years of age or older and eligible to receive Social Security Disability benefits. <p>Must meet a one year state residency requirement</p>
<p>Connecticut Homeowners' Tax Relief Program for Elderly/Disabled (Circuit Breaker) Homeowner InfoLine: (860) 418-6290 Call for more information https://portal.ct.gov/OPM/IGPP-MAIN/Grants/Tax-Relief-Grants/Homeowners--ElderlyDisabled-Circuit-Breaker-Tax-Relief-Program</p> <p>**Application may be made with the Assessor's Office between February 1 and May 15th.</p>	<p>State law provides a property tax credit program for Connecticut owners in residence of real property, who are elderly (65 and over) or totally disabled, and whose annual incomes do not exceed certain limits. The credit amount is calculated by the local assessor and applied by the tax collector to the applicant's real property tax bill. The amount of the credit that may be granted is up to \$1,250 for married couples and \$1,000 for single persons. Credit amounts are based on a graduated income scale.</p>

Interpersonal Violence

Organization Information	Brief Description
<p>CCADV - Connecticut Coalition Against Domestic Violence Call (888) 774-2900 for help or to talk to someone. Para hablar o recibir ayuda, llama al (844) 831-9200. http://www.ctcadv.org/</p>	<p>Connecticut's leading voice for victims of domestic violence and those agencies that serve them. A member organization of Connecticut's 18 domestic violence service agencies that provide critical support to victims including safety planning, emergency shelter, court advocacy, counseling and support groups, among other services.</p>

<p>CHERISH (Caring Home for Elderly Receiving Insight Safety and Healing) Community Health Center 635 Main Street Middletown, CT 06457 (203) 736-9944 (hotline) (203) 736-2601 ext. 1143 (voice) (888) 774-2900 (hotline) www.bhcare.org</p>	<p>Provides shelter through community based agencies for victims of elder abuse. Program also provides counseling, support groups, case management, court advocacy, and referral as needed.</p>
<p>Children at Heart and Girls Circle Community Health Center & New Horizons 635 Main Street Middletown, CT 06457 (888) 774-2900 (hotline) (860) 347-3044 (voice) (860) 344-9599 (voice) (860) 343-6470 (Victim Advocate) (844) 831-9200 (Spanish Hotline) http://www.newhorizonsdv.com</p>	<p>Ongoing support groups for youth ages 6 through 12 who have been affected by domestic abuse. Children at Heart is for youth ages 6-12 and Girls Circle is for girls ages 8-12</p>
<p>Intimate Partner Violence (IPV) Connecticut IPV Hotline Numbers: (888) 774-2900 (English) or (844) 831-9200 (Español) https://portal.ct.gov/DCF/Intimate-Partner-Violence/Home#AboutUs</p>	<p>The mission of DCF's Intimate Partner Violence (IPV) is to ensure the safety and well-being of children by having a full continuum of IPV services offered through a state and local coordinated response. A comprehensive response to IPV that offers meaningful and sustainable assistance to families that is safe, respectful, culturally relevant and responsive to the unique strengths and concerns of families impacted by IPV.</p>
<p>New Horizons PO Box 1036 Middletown, CT 06457 (888) 774-2900 (hotline) (860) 347-3044 (voice) (860) 344-9599 (voice) (860) 343-6470 (Victim Advocate) (844) 831-9200 (Spanish Hotline) http://www.newhorizonsdv.com</p>	<p>Domestic violence shelter program for Middlesex County provides crisis counseling and emergency shelter, advocacy, and support services to victims of domestic violence. Also provides community education and prevention programs. The Valley Shore satellite offers counseling as well as educational and supportive services. New Horizons is a program of The Community Health Center, Inc.</p>

Legal Services

Organization Information	Brief Description
<p>Connecticut Legal Rights Project, Inc. P.O. Box 351 Silver Street Middletown, CT 06457 (877) 402-2299 - Toll Free: (860) 262-5030</p>	<p>Connecticut Legal Rights Project, Inc., (CLRP) is a statewide non-profit agency which provides legal services to low income individuals with mental health conditions, who reside in hospitals or the community, on matters related to their treatment, recovery, and civil rights.</p>
<p>Connecticut Legal Services 62 Washington Street Middletown, CT (860) 344-0447 (800) 296-1467 https://ctlegal.org/</p>	<p>Connecticut's largest nonprofit law firm, dedicated to improving the lives of low-income people by providing access to justice. Provides free legal help for low-income people. Usually, that means households making less than 125% of the federal poverty line.</p>

<p>Legal Services to Victims of Violent Crime Victim Rights Center of Connecticut PO Box 631 Wallingford, CT 06492 (203) 350-3515 http://endsexualviolencect.org/</p> <p>Eligibility: Crime must have occurred in Hartford County, Middlesex County, New Haven County or in the towns of Bridgeport, Easton, Fairfield, Monroe, Stratford or Trumbull</p> <p>Cost: No fee, however clients will be required to pay for any court costs</p>	<p>Services are provided regardless of income. VRCCT provides victim-centered, trauma-informed holistic legal assistance and advice to victims of violent crime. Attorneys represent victims in: criminal, civil, and family court, but also assist clients with housing, employment, education (including Title IX), immigration, compensation and benefits issues. VRCCT has formed cooperative arrangements with sexual assault crisis services and other social service providers to integrate legal solutions into a comprehensive plan of recovery. VRCCT does not help with civil suits or cases where an individual wants to sue another individual. VRCCT does not represent defendants.</p> <p>Legal services provided in the following cases:</p> <ul style="list-style-type: none"> ● adult victims of sexual assault; ● child victims of sexual assault over age 11; ● child abuse; ● violence against LGBTQIA individuals; ● criminal elder abuse; and ● homicide
<p>Statewide Legal Services of Connecticut Legal Aid Services Referral (800) 453-3320 860-344-0380 Hartford and Middletown area callers http://apply.slsc.org/</p> <p>Service Area: Connecticut</p>	<p>Telephone intake point for the legal services network in Connecticut. Legal assistance for <u>civil matters ONLY</u>. Agency assesses caller's need for legal assistance, and will refer income eligible people to the legal aid organization that serves their town, when appropriate.</p> <p>Eligibility: <u>Civil cases ONLY</u>; Income restriction: 125% FPL; For people who have income between 125% and 200% of FPL, Statewide Legal Services (SLS) can do a more detailed assessment. All assessments for people over 125% FPL are on a case-by-case basis, and there is no guarantee of eligibility for people between 125% and 200% FPL</p>

LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer/Questioning+) - Services & Resources

Organization Information	Brief Description
Health Care Services	
<p>Middlesex Health Transgender Program 28 Crescent Street Middletown, CT 06457 (860) 358-3460 https://middlesexhealth.org https://middlesexhealth.org/transgender-medicine</p>	<p>Equitable and inclusive care to individuals who are transgender, gender non-conforming, or questioning. A dedicated Transgender Services Navigator helps individuals connect with providers and services, including: specially-trained primary care providers, hormone replacement therapy and gender transition surgery.</p>
Support Groups	
<p>Gender Discussion/Support Group - Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-3460 https://middlesexhealth.org https://middlesexhealth.org/transgender-medicine</p>	<p>A support group that connects transgender, gender non-conforming, and questioning individuals in the community and provides a safe, supportive space to openly discuss key issues. The group is facilitated by medical staff with special expertise in transgender care. Monthly meetings that take place on the first Tuesday of every month.</p>

<p>Transgender Family/Friends/Supports Group Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-3460 https://middlesexhealth.org https://middlesexhealth.org/transgender-medicine Meetings take place on the third Tuesday of every month.</p>	<p>A support group that connects allies for transgender individuals in a safe, trusting space to openly discuss ways to support those in their life that are questioning their gender or going through the process of transition. In addition, this group is a place to seek support from others with the shared experience of learning to adjust to, understand, and affirm the lives of transgender persons. The group is facilitated by medical staff with special expertise in transgender care.</p>
<p>Rainbow Alliance Tri-Town Youth Services 56 High Street Deep River, CT 06417 (860) 526.3600 http://tritownys.org/lgbtq-resources/</p>	<p>Support group for LGPTQ identifying children ages 10-18.</p>
<p>Food Assistance</p>	
<p>Hartford Lesbian and Gay Collective- Food Pantry for People Living with AIDS/HIV 64 Church Street Manchester, CT 06040 (860) 645.9855</p>	<p>Food pantry for people with AIDS/HIV. Service Area includes: Middletown, Colchester.</p>
<p>Houses of Worship</p>	
<p>First Church United Church of Christ 190 Court Street Middletown, CT 06457 (860) 346.6657 http://www.firstchurchmiddle.org/lgbt/town</p>	<p>First Church believes in full support and inclusion of Lesbian, Gay, Bisexual, Transgender, Queer, Questioning and Allies.</p>
<p>South Church 9 Pleasant Street Middletown, CT 06457 sochurch@att.net http://www.southchurchofmiddletown.org/</p>	<p>South Church believes in full support and inclusion of Lesbian, Gay, Bisexual, Transgender, Queer, Questioning and Allies.</p>
<p>Youth Services</p>	
<p>Our True Colors http://www.ourtruecolors.org/ http://www.ourtruecolors.org/Resources/GSA/PDF/School-Based-Sexual-Minority-Youth.pdf</p> <ul style="list-style-type: none"> ● Cromwell High School, (860) 632-4841 ● Coginchaug High School (Durham), (860) 349-7215 ● Daniel Hand High School (Madison), (203) 245-6350 ● East Hampton High School, (860) 365-4030 ● Guilford High School, (203) 453-2741 x234 ● Haddam-Killingworth High School, (860) 345-8541 ● Lyme-Old Lyme High School, (860) 434-1651 ● Middletown High School, (860) 704-4500 ● Old Saybrook High School, (860) 395-3175 ● Portland High School, (860) 342-1720 ● RHAM High School (Hebron), (860) 228-9474 ● Rocky Hill High School, (860) 258-7721 	<p>Gay-Straight Alliances (GSAs) within schools.</p>

Community Events	
<p>Middletown Pride Festival City of Middletown Middletown, CT 06457 Frequency: annually in June http://www.cityofmiddletown.com</p>	<p>A celebration of Middletown's diverse community and particularly the lives and contributions of its lesbian, gay, bisexual, transgender and queer/questioning residents. The event includes a parade that proceeds down Main Street and a festival.</p>
<p>Day of G.I.F.T.S. Middlesex Health 28 Crescent Street Middletown, CT 06457 Frequency: annually in November https://middlesexhealth.org https://stage.middlesexhealth.org/news-events-and-media/classes-and-events/a-day-of-g-i-f-t-s-20191102/flushcache/1/showdraft/1</p>	<p>A Day of Gathering Information for the Transgender Community to Support Health and Wellbeing. A one-day event dedicated to transgender and gender non-conforming persons, as well as those who support them. Medical experts from Middlesex Health, businesses whose products are for LGBTQ+ persons, and a number of special guest speakers are present.</p>
<p>Note: while the below organizations are outside of the Middlesex Health geographic service area, they are being included as helpful resources.</p>	
Organization Information	Brief Description
<p>True Colors 30 Arbor Street Suite 201A Hartford, CT 06106 (860).232.0049 http://www.ourtruecolors.org/</p>	<p>A non-profit organization. Works with other social service agencies, schools, organizations, and within communities to ensure that the needs of sexual and gender minority youth are both recognized and competently met. The organization trains people, organizes the largest LGBT youth conference in the country, and manages the state's only LGBT mentoring program.</p>
<p>CCAR-LGBTQ Recovery Group 198 Wethersfield Avenue Hartford, 06106 (860) 244-3343</p>	<p>A safe space for lesbians, gay men, bisexuals and transgender people and their allies to talk about how sexuality, gender expression and identity are connected to recovery.</p>
<p>The Hartford Gay & Lesbian Health Collective 1841 Broad Street (Main Office) Hartford, CT 06106 P.O. Box 2094 Hartford, CT 06145-2094 (860) 278.4163 http://www.hglhc.org/</p>	<p>Empowers individuals of diverse sexual orientations, gender identities and gender expressions to lead healthy lives through the provision of health and support services, education and advocacy. They offer dental services, ALASS, STD clinic, and the TWENTY club.</p>
<p>PFLAG PO Box 260733 Hartford, CT 06126-0733 (860) 785.0909 Email: pflaghartford@gmail.com http://www.pflaghartford.org</p>	<p>Through support, education, and advocacy, helps to make the community a healthier, more well-informed, safer, fairer, and a happier place for LGBTQ people, their families, and their loved ones.</p>
<p>Triangle Community Center Program Meetings: 618 West Avenue, Suite 205 Norwalk, CT 06850 Drop in Center: 650 West Avenue</p>	<p>Provides programming and resources to nurture growth and connection with the LBGTQ community. Provides mental health counseling, case management and referrals.</p>

Norwalk, CT 06850 (203) 853.0600 http://www.ctpridecenter.org/	
Stonewall Speakers PO Box 650 Guilford, CT 06437 (860) 341.2909 http://www.stonewallspeakers.org/	Strives to increase understanding, acceptance, and respect for lesbian, gay, bisexual and transgender people through educational outreach.
Connecticut TransAdvocacy Coalition P.O. Box 111 Farmington, CT 06034 (860) 255.8812 https://transadvocacy.org/	Mission is to make Connecticut a safe and tolerant place for the trans and gender non-conforming individual through education and social advocacy.
The Trevor Project Call: 1.866.488.7386 Text:Start to 678678 https://www.thetrevorproject.org	Founded in 1998 by the creators of the Academy Award®-winning short film TREVOR, The Trevor Project is the leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, queer & questioning (LGBTQ) young people under 25
DMHAS Gay-Straight Alliances 410 Capitol Avenue P.O. Box 341431 Hartford, CT 06134 (860) 418.6974 https://www.ct.gov/dmhas/cwp/view.asp?a=2902&q=534490	GSAs are in DMHAS state-operated facilities. GSA's support people who are lesbian, gay, bisexual and transgender and their allies by creating safe environments in mental health and substance abuse facilities to support each other.

Older Adult Services – Senior Centers

Organization Information	Brief Description
Caring Ways Adult Day Center 245 Boston Post Rd Old Saybrook, CT 06475 (860) 388-4455	Caring Ways Adult Day Center has been awarded a Title IIIB Grant that will allow individuals with financial need to attend the day center at no cost. There is no financial aid application required. Elderly residents of Old Saybrook and surrounding areas are eligible. Adult Day Care provides socialization and stimulation for those who are homebound, and they are a source of respite for family caregivers.
Colchester, City of 95 Norwich Avenue Colchester, CT 06415 (860) 537-3911 https://www.colchesterct.gov/senior-center	Provides support for older adults (55 years+) by providing programs and services designed to promote their independence, health, wellness and overall quality of life.
Cromwell Senior Center 41 West Street, Ground Floor Cromwell, CT 06416 (860) 632-3447 http://seniorcenter.us/sc/cromwell_senior_center_cromwell_ct	Offers educational programs, health and wellness programs, recreational and social programs, transportation services. Age 60+. Residents of Cromwell.
Durham Activity Center 350 Main Street	Provides recreational, educational, and community building activities. There is a Senior Cafe on site.

<p>Durham, CT 06422 (860) 788-3337 http://www.townofdurhamct.org/dac</p>	
<p>East Haddam Senior Center 15 Great Hillwood Road Moodus, CT 06469 (860) 873-5034 http://www.easthaddam.org/Senior-Center-3504/</p>	<p>Provides social, recreational, educational, and health related activities, and transportation to residents ages 50+.</p>
<p>East Hampton Senior Center 105 Main Street East Hampton, CT 06424 (860) 267-4426 http://www.easthamptonct.org/Pages/EastHamptonCT_Senior/index</p>	<p>A community place where older adults come together for services and activities that reflect their experience, skills and interests. Ages 60+.</p>
<p>Estuary Council of Seniors M. Monica Eggert Senior Center 220 Main Street Old Saybrook, CT 06475 (860) 388-1611 http://www.ecsenior.org/ <i>Serves the towns of:</i> Chester, Clinton, Deep River, Essex, Killingworth, Lyme, Old Lyme, Old Saybrook</p>	<p>Promotes maximization of independence, dignity and quality of life for seniors through programs and advocacy. Ages 50+. ECSI provides programs and activities to keep seniors healthy, vibrant, and independent. They are the sole provider of Meals on Wheels for the nine-towns including <i>Chester, Clinton, Deep River, Essex, Killingworth, Lyme, Old Lyme, Old Saybrook and Westbrook</i>. ECSI also provides daily activities, outpatient medical transportation, free health screenings and services, fitness programs, support groups, and more.</p>
<p>Haddam Senior Center 11 Jail Hill Road Haddam, CT 06438 (860) 554-5246 http://www.haddam.org/seniors.html</p>	<p>Promotes the overall well-being of adults 60 and older within the community by providing programs for everyday enjoyment and enrichment, assistance and access to local and government social services.</p>
<p>Marlborough Senior Center 26 North Main Street P.O. Box 29 Marlborough, CT 06447 (860) 295-6200 https://www.marlboroughct.net/index.php/boards-commissions/departments/senior-center</p>	<p>Provides enriching, inclusive and satisfying events and activities as well as services aimed to support the well-being, health and independence of the senior population.</p>
<p>Middlefield Senior Center 405 Main Street Middlefield, CT. 06455 (860) 349-7121 http://www.middlefieldct.org/</p>	<p>A multi-purpose agency that provides health services, nutrition, education, recreation, wellness programs, volunteer opportunities and supportive services. Provide a variety of services and serve as a resource to the senior residents of Middlefield. Open to all residents over age 60.</p>
<p>Middletown Senior Center 61 Durant Terrace Middletown, CT 06457 (860) 638-4540 Phone http://www.middletownct.gov/seniors</p>	<p>Provides a comprehensive service and referral program tailored to meet the needs of adults 60 years of age and older. Works to enhance the dignity of seniors while supporting their wellness and independence and encouraging their community involvement.</p>

<p>The Waverly Center 7 Waverly Avenue Portland, CT 06480 (860) 342-6760 https://www.portlandct.org/senior-services/</p>	<p>Strives to be a welcoming place to help people with life's transitions. Focus on people aged 50 and over. Provides social and recreational programs, educational opportunities, social occasions, travel and referral to other agencies for needed services.</p>
<p>Westbrook Senior Center Teresa Mulvey Municipal Building (lower level) 866 Boston Post Road Westbrook, CT 06498 (860) 399-2029 http://www.westbrookct.us</p>	<p>Promotes improvement in the quality of life for the citizens of Westbrook and neighboring shoreline towns. Daily activities. Goal of the program is to promote physical and mental wellbeing. Ages 60+.</p>

Older Adult Services & Resources

Organization Information	Brief Description
Social Services	
<p>Senior Resources: Agency on Aging 19 Ohio Avenue, Suite 2 Norwich, CT 06360 (800) 690-6998 (860) 887-3561 http://www.seniorresourcesec.org/</p>	<p>Mission: to provide information and services to the aging population, individuals with disabilities, their families and care providers to maintain or improve their independence and quality of life.</p> <p>The Senior Resources Agency on Aging's website provides many links and programs for caregivers, family members, and service providers on how to better care for senior citizens. Information on services include:</p> <ul style="list-style-type: none"> ● Aging and Disability Resource Center ● Connecticut Statewide Respite Care Program ● Congregate Housing Services Program ● Grandparent Support ● Nutrition ● Transportation <p><i>Visit the website for a full list</i></p>
<p>State Supplement to the Aged, Blind or Disabled (Cash Assistance) State of Connecticut Social Services-Southern Regional, Middletown 2081 South Main Street, Suite B Middletown, CT 06457 (855) 626-6632 http://portal.ct.gov/DSS/Health-And-Home-Care/Disability-Services/Disability-Services</p>	<p>State Supplement Cash assistance benefits program for the Aged, Blind or Disabled is administered by the Department of Social Services (DSS) and serves adults who are ages 18 to 64 and have a permanent disability, individuals age 65 and older, and individuals who are blind. Eligible individuals also must have income and assets that are below allowable limits. Eligible recipients receive cash assistance that "supplements" other income they have to help them pay for living expenses. If you are eligible and live in a boarding home or residential care home (RCH), the State Supplement cash assistance program also assists those residents.</p>
Housing	
<p>Low Income/Subsidized Private Rental Housing for Older or Disabled Adults Elderly Housing Management Saint Luke's Apartments for Seniors 144 Broad Street Middletown, CT 06457</p>	<p>Low Income/Subsidized Private Rental Housing for Older for Disabled Adults located at Saint Luke's Apartments for Seniors provides rental apartments for income eligible senior citizens ages 62+.</p>

<p>(860) 347-1168 http://newsam.org/</p>	
<p>Low Income/Subsidized Private Rental Housing for Older or Disabled Adults Old Middletown High School Elderly Housing 251 Court Street Middletown, CT 06459 (860) 638-3602 http://www.oldmiddletown-apts.com/</p>	<p>Low Income/Subsidized Private Rental Housing for Older for Disabled Adults is an independent living rental facility that offers housing for low income older adults and adults who have a physical disability with mobility impairment. Older adults must be 62+ in age.</p>
<p>Non-Portable Public Housing Rent Subsidy Program Middletown Housing Authority SBONA Tower 40 Broad Street Middletown, CT 06457 (860) 346-8671 Office Hours: Mon-Fri 8:30am-4:30pm http://www.middletownha.org/</p>	<p>Non-Portable Public Housing Rent Subsidy Program is for older adults who are low income and are 50+ in age. This program is a HUD subsidized rental facility.</p>
<p>Connecticut Renters' Rebate for Elderly/Disabled Renters Program Hotline: (860) 418-6377 Call for more information https://portal.ct.gov/OPM/IGPP-MAIN/Grants/Tax-Relief-Grants/Renters--Rebate-For-ElderlyDisabled-Renters-Tax-Relief-Program</p> <p>**Applicant may have rented elsewhere in Connecticut for all or some portion of the year preceding the year of filing, but must file in the town in which they reside, during the filing period.</p> <p>Note: Application may be made at the town social service agency, or the Assessor's Office, depending on the town, between April 1st and October 1st.</p>	<p>State law provides a reimbursement program for Connecticut renters who are elderly or totally disabled, and whose incomes do not exceed certain limits.</p> <p>Eligibility:</p> <ul style="list-style-type: none"> ● Recipient or spouse must be 65 years of age, or older, ● or be 50 years of age or older and the surviving spouse of a renter who at the time of the renter's death had qualified and was entitled to tax relief provided such spouse was living with such renter at the time of the renters' death, ● or 18 years of age or older and eligible to receive Social Security Disability benefits. <p>Must meet a one year state residency requirement.</p>
<p>Connecticut Homeowners' Tax Relief Program for Elderly/Disabled (Circuit Breaker) Homeowner InfoLine: (860) 418-6290 Call for more information https://portal.ct.gov/OPM/IGPP-MAIN/Grants/Tax-Relief-Grants/Homeowners--ElderlyDisabled-Circuit-Breaker-Tax-Relief-Program</p> <p>**Application may be made with the Assessor's Office between February 1 and May 15th.</p>	<p>State law provides a property tax credit program for Connecticut owners in residence of real property, who are elderly (65 and over) or totally disabled, and whose annual incomes do not exceed certain limits. The credit amount is calculated by the local assessor and applied by the tax collector to the applicant's real property tax bill. The amount of the credit that may be granted is up to \$1,250 for married couples and \$1,000 for single persons. Credit amounts are based on a graduated income scale.</p>
In-Home Services (Non-Medical)	
<p>Middlesex Health Care at Home 770 Saybrook Rd # 4 Middletown, CT 06457 (860) 358-5600 https://middlesexhealth.org</p>	<p>Middlesex Health Care at Home provides home health aides, in addition to clinical services.</p>
<p>Unison Health Services Home Health Aide</p>	<p>Home health aides provide personal care assistance, meal planning and preparation, socialization, and exercise under</p>

<p>921 Saybrook Road Middletown, CT 06457 (860) 347-4446 (877) 520-6628 Home care services available 24/7 http://www.unisonhealthservices.com/</p>	<p>the supervision of a nurse or therapist.</p>
<p>Home Instead Senior Care-Middletown Non-Medical Home Care 79 Mill Street Middletown, CT 06457 (860) 316-2331 https://www.abhomecare.com/</p>	<p>Non-Medical Home Care offers personal care assistance, chore assistance, house cleaning, meal preparation, friendly visiting, shopping and live-in companions.</p>
<p>Home Care for Elders Program 1215 South Main Street Middletown, CT 06457 (860) 346-0771 http://changeinonline.org/index.htm</p>	<p>The Home Care for Elders Program assists elderly individuals to remain at home through a variety of services including Companion/homemaker, chore, and respite services, etc.</p>
<p>In Home Assistance A&B Homecare Solutions-Middletown Site 460 Smith Street, Suite H Middletown, CT 06459 (860) 632-1766 https://www.abhomecare.com/</p>	<p>Home care agency offers live in companions, homemakers, chore assistance, personal care aides and shopping services.</p>
<p>Non-Medical Home Care Visiting Angels-Middlefield 6 Way Road Middlefield, CT 06455 (860) 349-7016 Office Hours: Mon-Fri 8am-4:30pm; On call: 24/7 www.visitingangels.com/middlefield</p>	<p>Provides personal care assistance, chore assistance, house cleaning, meal preparation, friendly visiting, shopping, local transportation and live-in companions.</p>
<p>Home Health Aide New England Home Care-Cromwell 136 Berlin Road Cromwell, CT 06416 (860) 632-4000 http://www.newenglandhomecare.com/</p>	<p>Home health aides assist with personal care, chore assistance, house cleaning, meal preparation, friendly visiting, shopping and live-in companions.</p>
<p>Note: while the below organizations are outside of the Middlesex Health geographic service area, they are being included as helpful resources.</p>	
<p>Organization Information</p>	<p>Brief Description</p>
<p>Connecticut Home Care Program for Elders Connecticut State Department of Social Services http://www.portal.ct.gov/ or https://portal.ct.gov/-/media/Departments-and-Agencies/DSS/Health-and-Home-Care/Community-Options/Connecticut-Home-Care-Program-For-Elders.pdf</p>	<p>The Connecticut Home Care Program for Elders helps individuals to stay at home instead of going to a nursing home. Many people in nursing homes might have been able to stay in their homes if they had assistance with personal care, cooking and cleaning. There are financial guidelines for low income adults age 65+.</p>

<p>State Department on Aging 55 Farmington Avenue Hartford, CT 06105 (860) 424-5274 (800) 537-2549 http://www.ct.gov/agingservices/site/default.asp</p>	<p>The Department on Aging ensures that Connecticut’s elders have access to the supportive services necessary to live with dignity, security, and independence. The Department on Aging is responsible for planning, developing, and administering a comprehensive and integrated service delivery system for older persons in Connecticut.</p>
<p>Center for Medicare Advocacy Connecticut Office P.O. Box 350 Willimantic, CT 06226 (860) 456-7790 http://www.medicareadvocacy.org/</p>	<p>The Center for Medicare Advocacy is a national nonprofit, nonpartisan law organization that provides education, advocacy and legal assistance to help older people and people with disabilities obtain fair access to Medicare and quality health care. The Center is headquartered in Connecticut and Washington, DC with offices throughout the country.</p>
<p>Medicare.Gov The Official U.S. Government Site for Medicare 7500 Security Boulevard Baltimore, MD 21244 www.medicare.gov</p>	<p>Resource for questions related to Medicare.</p>
<p>Alzheimer’s Association Connecticut Chapter (800) 272-3900 (24 hour hotline) http://www.alz.org/ct/</p>	<p>Support and education for people with any form of dementia, care partners, professionals, the general public. In addition to Helpline, services include care consultations, caregiver education programs, statewide network of support, Medic Alert/Safe Return e-services.</p>
<p>Alzheimer’s Respite Program Alzheimer’s Association Connecticut Chapter (800) 272-3900 http://www.alz.org/ct/</p>	<p>The Respite Care Program is designed to provide a break, or a limited time of caregiver relief, from the constant physical and emotional stress of caring for a person with Alzheimer’s disease or a related disorder.</p>
<p>Benefits CheckUp National Council on Aging https://www.benefitscheckup.org/</p>	<p>A Benefits CheckUp is a free and confidential questionnaire that will screen you for eligibility for federal, state and local financial programs for individuals 60+ and those receiving Medicare at any age.</p>

Support Groups

Organization Information	Brief Description
<p>Al-Anon Family Support (888) 825-2666 Refer to website for locations https://www.ctalanon.org</p>	<p>Al-Anon is a spiritually based organization that helps the families and friends of people struggling with alcohol misuse to connect and support each other through meetings, information, and shared experiences.</p>
<p>Alcoholics Anonymous (866) 783-7712 Office Hours: 24/7 Refer to website for locations https://ct-aa.org/</p>	<p>Alcohol dependency support groups – a self-help organization that follows the 12 step model in support groups for people in all stages of recovery from alcohol abuse. Caller can contact local answering service to request to speak to a recovering alcoholic for support.</p>

<p>Art Therapy Support Group Community Health Center - Clinton location 144 East Main Street Clinton CT 06413 (860) 664-0787 https://www.chc1.com/locations/clinton/</p>	<p>The Art Therapy Support Group provides an opportunity for those who find it hard to express what they are feeling in words to use a different means of personal expression. Participants use art in order to help them work through difficult times. The group meets every Tuesday.</p>
<p>Bereavement Support Group Middlesex Health - 3 locations</p> <p>1) Main Middlesex Hospital location 28 Crescent Street, Middletown, CT 06457 (860) 358-6725 https://middlesexhealth.org</p> <p>2) Middlesex Health Cancer Center location 534/536 Saybrook Road, Middletown, CT 06457 (860) 358-6725</p> <p>3) Essex Library Association location 33 West Avenue, Essex, CT 06426 (860) 358-6725</p>	<p>Middlesex Health Bereavement Support Group is meant for anyone who has lost a loved one and is in need of guidance on how to navigate a difficult time in one's life. The group meets on the first and third Monday of each month.</p>
<p>Better Breathers Club Support Group Water's Edge Center for Health & Rehabilitation 111 Main Street Middletown, CT 06457 (860) 347-7286 https://action.lung.org/site/TR?fr_id=18732&pg=entry</p>	<p>The Better Breathers Club Support Group was formed to help patients with respiratory diseases cope with their difficulties. This group offers programs with different guest lecturers/educators on a variety of topics of interest to patients with pulmonary disease. Meets the second Thursday every other month from 12-1pm. A complimentary light lunch is served.</p>
<p>Breastfeeding Support Group Middlesex Health Main Middlesex Hospital location Pregnancy and Birth Center 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org</p>	<p>A support group that provides the opportunity to share challenges and solutions with other new moms. Facilitated by a lactation consultant. Meets every week on Tuesday.</p>
<p>Caregiver Support Group Middlesex Health Outpatient Center Conference Room A (second floor) 534 Saybrook Road Middletown, CT 06457 (860) 258-2037 Meeting Time: 1pm-2:30pm joan.perkins@midhosp.org</p>	<p>The Caregiver Support Group provides the opportunity for those providing care to loved ones to connect with people who share similar experiences, share solutions to challenges, learn of available resources, and provide and receive guidance in a judgment-free atmosphere. This support group takes place the second Wednesday of every month.</p>
<p>Children at Heart and Girls Circle Community Health Center & New Horizons 635 Main Street Middletown, CT 06457 (860) 344-9599 Hotline: (888) 774-2900 Victim Advocate: (860) 343-6470 Spanish Hotline: (844) 831-9200 http://www.newhorizonsdv.com/</p>	<p>Ongoing support groups for youth ages 6-12 who have been affected by domestic abuse. Children at Heart is for youth ages 6-12 and Girls Circle is for girls ages 8-12. Groups meet at the Community Health Center.</p>

<p>Domestic Violence Support Group The Wellness Center 635 Main Street Middletown, CT 06457 (860) 344-9599 https://newhorizonsdv.com/node/41</p>	<p>A support Group for individuals who have experienced or are currently experiencing domestic violence. A domestic violence advocate facilitates discussions on exposure to trauma and its effect on the mind, body, and soul. Throughout this support group, individuals will work towards changing their life for the better and paving a path of empowerment, strength, and courage, leading to a brighter tomorrow.</p> <p>Child care is provided. Our dedicated Child Advocate will hold a simultaneous youth-oriented program to educate children of family violence, safety planning, and assist in the development of their self-esteem. The group meets every Tuesday.</p>
<p>Expressions-Creative Arts Groups for Survivors of Incest Women and Families Center Sexual Assault Crisis Service-Middletown Satellite 100 Riverview Center, Suite 150 Middletown, CT 06457 (860) 344-1474 Hotline: (203) 235-4444 24/7 Hotline: (888) 999-5545 http://www.womenfamilies.com/</p>	<p>Creative arts group of survivors of incest/child sexual abuse. This support group is offered periodically.</p>
<p>Gender Discussion/Support Group Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-3460 https://middlesexhealth.org https://middlesexhealth.org/transgender-medicine</p>	<p>A support group that connects transgender, gender non-conforming, and questioning individuals in the community and provides a safe, supportive space to openly discuss key issues. The group is facilitated by medical staff with special expertise in transgender care. Monthly meetings that take place on the first Tuesday of every month.</p>
<p>Handling the Holidays: A Bereavement Support Group - ANnual Middlesex Health Outpatient Center 2nd Floor Conference Center 534 Saybrook Road Middletown, CT 06457 https://middlesexhealth.org Meets annually in December, 6pm to 7:30pm</p>	<p>Getting through the holidays can be difficult, not just during the first year of bereavement, but for subsequent years as well. Shared traditions, such as religious services and family gatherings, make people acutely aware of their loss. This can lead to overwhelming feelings of sadness, loneliness, and fatigue. This annual support group that meets in December is an opportunity for grieving persons to come together for both information and support in coping with the challenges of the holiday season.</p>
<p>Health/Disability Related Support Groups The Epilepsy Foundation of Connecticut 386 Main Street Middletown, CT 06457 http://www.epilepsyct.com/</p>	<p>Sponsors support groups in Bethel, Milford and Stamford for people with epilepsy, family members, and friends. Quarterly meetings also held in Middletown and Branford. Support groups for young adults ages 18-30 meet in Farmington. Visit the website for further details.</p>
<p>Health Related Therapy and Support Group for Women who are HIV+ Community Health Center Oasis Wellness Center 33 Ferry Street Middletown, CT 06457 (860) 347-6971 ext. 3911 https://www.chc1.com/</p>	<p>Therapy and support group for women who are HIV+ meets on Wednesdays at 4:15pm. Dinner served after meeting.</p>

<p>Hope and Support Groups Tricircle, Inc. 6 Way Road Middlefield, CT 06455 (203) 631-1743 http://www.tricircleinc.com/</p>	<p>Support groups provided for parents, guardians and loved ones concerned about someone struggling with a substance use disorder. Visit the website for a listing of support groups and for more information.</p>
<p>Left Behind: Survivors of Suicide and Overdose Support Group Middlesex Health Main Middlesex Hospital location 28 Crescent Street Middletown, CT 06457 (860) 358-3426 https://middlesexhealth.org</p>	<p>A Community support group that provides healing to people coping with the shock, grief and complex emotions that accompany the loss of a loved one by suicide or substance overdose. This support group meets on the first Monday of every month.</p>
<p>Leukemia, Lymphoma, and Multiple Myeloma Support Group Middlesex Health 536 Saybrook Road Middletown, CT 06457 (860) 358-2053 https://middlesexhealth.org</p>	<p>Support group through Middlesex Health's Cancer Center for patients with Leukemia, Lymphoma, and Multiple Myeloma meets on the first Thursday of the month from 5:30pm-7pm in the Cancer Center Radiation Oncology Department Reception Area.</p>
<p>Loss of a Child (of any age) Bereavement Support Group Middlesex Health Main Middlesex Hospital location 28 Crescent Street Middletown, CT 06457 (203) 887-9561 https://middlesexhealth.org</p>	<p>Middlesex Health Bereavement Support Group is meant for those who have lost children, grandchildren, siblings, nieces, nephews, etc. and is in need of guidance on how to navigate a difficult time in one's life. The group meets on the second Tuesday of each month.</p>
<p>Narcotics Anonymous (800) 627-3543 Refer to website for locations https://ctna.org/</p>	<p>N.A. is a nonprofit fellowship or society of men and women for whom drugs have become a major problem. It is made up of people who are recovering from drug addiction who meet regularly to help each other stay clean. It is a program of complete abstinence from all drugs. There is only one requirement for membership, the desire to stop using.</p>
<p>Non-offending Parents and Caregivers Women and Families Center Sexual Assault Crisis Service-Middletown Satellite 100 Riverview Center, Suite 150 Middletown, CT 06457 (860) 344-1474 Hotline: (203) 235-4444 24/7 Hotline: (888) 999-5545 http://www.womenfamilies.com/</p>	<p>Support group for non-offending parents of sexual assault survivors. This support group is offered periodically.</p>
<p>Opioids Support Group - Individuals Ministerial Health Fellowship Middletown Recovery Together (203) 443-7955</p>	<p>A support group to aid individuals who are struggling with opioid addiction. Members of the support group will work with recovery coaches with lived experience in order to receive guidance during a very challenging time. Middletown Recovery Together is a partnership between the Ministerial Health Fellowship, Middlesex Health, and Columbus House for the DMHAS "How Can We Help?" project.</p>

<p>Opioids Support Group – Families/Loved Ones/Friends Ministerial Health Fellowship Middletown Recovery Together (203) 443-7955</p>	<p>A support group to aid families, loved ones and friends of those who are struggling with opioid addiction. Middletown Recovery Together is a partnership between the Ministerial Health Fellowship, Middlesex Health, and Columbus House for the DMHAS "How Can We Help?" project.</p>
<p>Parent Support Groups Middletown Family Resource Centers Macdonough School Family Resource Center 66 Spring Street Middletown, CT 06457 (860) 638-3742 https://www.middletownschoools.org/departments/family_resource_center</p>	<p>Family support centers for Middletown residents who live in the Macdonough and Farm Hill school districts offers educational, recreational, and supportive programs for parents, children, and youth in the area. Specific center services include parenting education, resources for child care and family life, and interactive play groups for parents and children.</p>
<p>Parenting Support Group Community Health Center – Clinton location 144 East Main Street Clinton CT 06413 (860) 664-0787 https://www.chc1.com/locations/clinton/</p>	<p>The Parenting Support Group provides parents with a safe space to speak about shared experiences, while also expressing the difficulty that comes with parenting. The group meets every Monday from 2:30pm.</p>
<p>Relaxation Support Group Community Health Center - Clinton location 144 East Main Street Clinton CT 06413 (860) 664-0787 https://www.chc1.com/locations/clinton/</p>	<p>The Relaxation Support Group allows for group meditation in a serene environment. The group is meant for participants to be able to start their day off with a clear mind and a healthy body. Participants are able to learn relaxation techniques through this interactive group. Meetings are held every Wednesday.</p>
<p>The Sacred Art of Grieving Support Group – Annual Middlesex Health Outpatient Center Conference Center 534 Saybrook Road Middletown, CT 06457 https://middlesexhealth.org</p>	<p>Meets annually in September. A one-time annual meeting to gently support those with recent loss and to help provide a template for the losses yet to be. Tangible ideas will be offered to help navigate the land of Loss, with key reminders about the path toward healing. Current bereavement teaching and spiritual wisdom are shared, affirming that grief is, indeed, a sacred journey</p>
<p>Sexual Assault/Incest Support Groups: Incest Survivors Women and Families Center-Sexual Assault Crisis Service, Middletown Satellite 100 Riverview Center, Suite 150 Middletown, CT 06457 (860) 344-1474 24/7 Hotline: (888) 999-5545 http://www.womenfamilies.org/Content/Sexual Assault Crisis Services.asp</p>	<p>A support group for female survivors of child sexual abuse/incest. Groups are offered periodically</p>
<p>Sexual Assault/Incest Support Groups: Partners Women and Families Center-Sexual Assault Crisis Service, Middletown Satellite 100 Riverview Center, Suite 150 Middletown, CT 06457 (860) 344-1474 24/7 Hotline: (888) 999-5545 http://www.womenfamilies.org/Content/Sexual Assault Crisis Services.asp</p>	<p>A support group for partners of sexual assault survivors offered periodically.</p>

<p>Sexual Assault/Incest Support Groups: Rape (Women) Women and Families Center-Sexual Assault Crisis Service, Middletown Satellite 100 Riverview Center, Suite 150 Middletown, CT 06457 (860) 344-1474 24/7 Hotline: (888) 999-5545 http://www.womenfamilies.org/Content/Sexual_Assault_Crisis_Services.asp</p>	<p>A support group for adult female survivors of rape, recent or past. The support group is offered periodically.</p>
<p>Sexual Assault/Incest Support Groups: Teen Women and Families Center-Sexual Assault Crisis Service, Middletown Satellite 100 Riverview Center, Suite 150 Middletown, CT 06457 (860) 344-1474 24/7 Hotline: (888) 999-5545 http://www.womenfamilies.org/Content/Sexual_Assault_Crisis_Services.asp</p>	<p>A support group for girls ages 12 through 17 who have experienced any type of sexual abuse. The support group meets on Thursdays at 7pm.</p>
<p>Smoking Cessation Support Group Community Health Center, Inc. 675 Main Street Middletown, CT 06457 (860) 347-6971 https://middlesexhealth.org</p>	<p>A support group to assist with smoking cessation.</p>
<p>Smoking Cessation Support Group Center for Chronic Care Management Middlesex Health 770 Saybrook Road Middletown, CT 06457 (860) 358-5420</p>	<p>A support group to assist with smoking cessation.</p>
<p>Spanish Speaking-Self Esteem Issues New Horizons-Valley Shore Domestic Violence Services 114 East Main Street Clinton, CT 06413 (860) 644-0787 ext. 8417 Spanish Hotline: (888) 831-2900 http://www.newhorizonsdv.com/</p>	<p>Spanish and English speaking support group for women 16+ affected by domestic violence with a focus on self-esteem issues that meets in Clinton.</p>
<p>Stroke Support Group Middlesex Health 536 Saybrook Road - Outpatient Center Middletown, CT 36457 (860) 358-6440 StrokeSupport@midhosp.org https://middlesexhealth.org</p>	<p>Strokes can be life changing. A patient who has had a stroke may find that a stroke can affect patients' families and interpersonal relationships. Meeting with others who have been in similar circumstances can help give support, comfort, and hope. Other patients and families can also offer practical advice on adaptations and resources. This group meets every fourth Saturday of the month.</p>
<p>Suboxone Support Group Community Health Center - Clinton location 144 East Main Street Clinton CT 06413 (860) 664-0787 https://www.chc1.com/what-we-do/specialty-services/substance-use/</p>	<p>The Suboxone Support Group provides a behavioral health support system along with aid in primary care treatment coordination that will help you regain control over your life. Our providers are supportive and offer treatment without judgment. Meetings are held on the first and third Mondays of each month.</p>

<p>Therapy Support Group Community Health Center – Clinton location 144 East Main Street Clinton CT 06413 (860) 664-0787 https://www.chc1.com/locations/clinton/</p>	<p>Meetings are held every Thursday.</p>
<p>Transgender Family/Friends/Supports Group Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-3460 https://middlesexhealth.org https://middlesexhealth.org/transgender-medicine</p>	<p>A support group that connects allies for transgender individuals in a safe, trusting space to openly discuss ways to support those in their life that are questioning their gender or going through the process of transition. In addition, this group is a place to seek support from others with the shared experience of learning to adjust to , understand, and affirm the lives of transgender persons. The group is facilitated by medical staff with special expertise in transgender care. Meetings take place on the third Tuesday of every month.</p>
<p>Traumatic Brain Injury Support Group Community Health Center – Clinton location 144 East Main Street Clinton CT 06413 (860) 664-0787 https://www.chc1.com/locations/clinton/</p>	<p>Meetings are held every Friday.</p>
<p>Young Widow/Widowers Group Bereavement Support Group Middlesex Health Cancer Center location 534/536 Saybrook Road Middletown, CT 06457 (860) 358-2053 https://middlesexhealth.org</p>	<p>A support group for young widows/widowers in need of guidance on how to navigate a difficult time in one’s life.</p>
<p>Women’s Support Group Community Health Center - Clinton location 144 East Main Street Clinton CT 06413 (860) 664-0787 https://www.chc1.com/locations/clinton/</p>	<p>Meetings are held every Thursday.</p>

Tax Assistance

Organization Information	Brief Description
<p>AARP Foundation Tax-Aide Program Tax-Aide Site Locator Service (888) 227-7669 (888-AARP-NOW) http://www.aarp.org/applications/VMISLocator/searchTaxAideLocations.action Service area: Connecticut</p>	<p>AARP Foundation serves vulnerable people 50 and older by creating and advancing effective solutions that help them secure the essentials. AARP Tax-Aide Site Locator provides Connecticut sites offering free income tax assistance for low and middle income households. Assistance to Connecticut residents ages 60+ is given priority. AARP Tax-Aide Income Tax Assistance Sites are active during tax season, February-April. Call or visit the website to access Site Locator.</p>

<p>Community Renewal Team (CRT) Free Volunteer Income Tax Assistance (VITA) CRT Location for Middlesex County 44 Hamlin Street Middletown, CT 06457 (860) 347-4465 http://www.crtct.org/en/</p>	<p>Get free help filing your taxes with CRT and trained volunteers. Trained volunteers help taxpayers prepare and file basic tax returns. Tax forms are completed with guidance and support provided by certified staff. Then tax returns are filed electronically from CRT at no cost. Refunds are generally received within 2 weeks when filed online.</p>
<p>IRS VITA (Volunteer Income Tax Assistance) Site Locator Internal Revenue Service 135 High Street Hartford, CT 06103 (800) 906-9887 http://irs.treasury.gov/freetaxprep/</p>	<p>IRS VITA Site Locator provides information on VITA (Volunteer Income Tax Assistance) Sites nationwide offering free income tax assistance for low and middle income households.</p>

Transportation Services

Organization Information	Brief Description
<p>9 Town Transit (CT Valley-Shore Region Transportation) (860) 510-0429 http://estuarytransit.org/ Available: Weekdays and Saturdays Cost \$?: Yes Wheelchairs: Yes</p>	<p>Public transit for Chester, Clinton, Deep River, Durham, Essex, East Haddam, Haddam, Killingworth, Lyme, Old Lyme, Old Saybrook, and Westbrook, with connections to New Haven, New London and Middletown areas.</p> <p>Providing public transit wherever an individual needs to go with general public Dial-A-Ride service throughout the twelve town region. Offering five deviated bus routes from Old Saybrook to Madison, Old Saybrook to Chester, Old Saybrook to New London, Old Saybrook to Middletown and the new Madison to Middletown route. Note: The Middletown shuttle service stops at Middlesex Hospital, bus station and Middlesex Community College only.</p>
<p>American Cancer Society "Road to Recovery" Program (800) 227-2345 Cost: Free Eligible: Patient must be able to stand up Wheelchairs: Yes. Patient must be with a caretaker</p>	<p>Serving Locations: Call for more info. Provides transportation to and from treatment for people with cancer who do not have a ride or are unable to drive themselves.</p>
<p>Cromwell Senior Center Transportation (860) 632-3451 or (860) 632-3447 Available: Weekdays Cost: Free Wheelchairs: Yes</p>	<p>Serving Locations: Cromwell. Provides various transportation services for senior and disabled Cromwell residents, including dial-a-ride, shopping routes, transportation to senior center programs, and out-trips.</p>
<p>CT Taxi (860) 343-3337 or (888) 930-0009 (toll-free) Available: 24/7 Cost \$?: Yes Wheelchairs: Yes. Must have a collapsible chair. Must be able to get up by themselves or be with a caretaker. No electric wheelchairs.</p>	<p>Serving Locations: Call for more info.</p>

<p>Disabled American Veterans - DAV Transportation Network (203) 932-5711, ext 3420 M-F: 8am-4pm; Must call at least five days in advance of appointment to allow DAV time to recruit volunteer driver. Wheelchairs: No</p>	<p>Veteran with illness or disability who needs transportation to medical appointments at West Haven medical center.</p>
<p>Estuary Council of Seniors Medical Outpatient Transportation (860) 388-1611 Eligibility: 60 and over, living within the 9 town estuary region, to medical appointments within the 9 town area and beyond. Cost \$?: Yes Wheelchairs: Yes. Discuss this when setting up appointment</p>	<p>Serving Locations: Chester, Clinton, Deep River, Essex, Killingworth, Lyme, Old Lyme, Old Saybrook, Westbrook.</p>
<p>Executive 2000 Taxi Service (860) 888-8888 http://www.mytaxicoupon.com/home.html Available: 24/7 Cost \$?: Yes Wheelchairs: Call 24 hours in advance for a wheelchair accessible van</p>	<p>Serving Locations: Call for more info.</p>
<p>F.I.S.H (Friends in Service Here) (860) 388-2693 Available: 24/7 Medical or Dental Appointments Cost: Free Wheelchairs: No</p>	<p>Serving Locations: Chester, Deep River, Essex, Ivoryton.</p>
<p>Haddam Senior Center (860) 345-4621 Eligibility: Age 60+ or disabled; no ongoing rides Cost: Free Wheelchairs: Yes</p>	<p>Serving Locations: Haddam, Haddam Neck, Higganum</p>
<p>Middletown Area Transit (M.A.T.) (860) 346-0212 ext 2 (Middletown) (860) 347-7657 (Portland, Durham, East Hampton) Cost \$?: Yes Wheelchairs: Yes For hours of operation, visit website. https://www.middletownareatransit.org/</p>	<p>Serving the towns of Middletown, Middlefield, East Hampton, Portland, Durham and parts of Cromwell and Meriden. MAT provides direct service to AMTRAK and the Westfield Shopping Mall in Meriden.</p> <p>Connections are available to Higganum, Chester, Essex and Old Saybrook via the 9 Town Transit. In addition, connections are available to Wethersfield, Rocky Hill, Hartford and New Haven via CT Transit.</p>
<p>Middletown Area "Dial-A-Ride" 860-346-0212 (Schedule info for Cromwell, Meriden, Middletown) 860-347-7657 (Schedule info for Durham, East Hampton, Portland) Eligibility: Age 60+ or people with disabilities (application required) Cost \$?: Yes Wheelchair lift at curbside Call for a complete list of locations. http://www.cityofmiddletown.com/346/Dial---A---Ride</p>	<p>Serving Locations: East Hampton, Portland, Middletown, Middlefield, Durham, Cobalt, Middle Haddam, Rockfall.</p> <p>Rides for medical services, except for Middletown. For Middletown, only provides rides to the senior center except if have a qualifying ADA (Americans with Disabilities Act) disability.</p>

<p>Moodus/East Haddam Seniors (860) 873-5034 Available: Weekdays, flexible hours Provides transportation for daily living activities and recreational programs. Cost \$?: Yes Wheelchairs: No</p>	<p>Serving Locations: Moodus, East Haddam</p>
<p>Veyo (Medicaid Recipients) (855) 478-7350 Need to call at least 48 hours (not including weekends and holidays) before appointment. Cost: Free Wheelchairs: Yes</p>	<p>Service locations - All of Connecticut</p> <p>Note: The Department of Social Services' contract for services provided by Veyo, a Total Transit company, is effective from January 1, 2018, through December 31, 2020. The NEMT (Non-Emergency Medical Transportation) program has been restructured to provide the contractor with greater flexibility and capacity to engage a range of transportation through the state in order to best serve Medicaid members.</p>
Transportation Resource	
<p>Mobility Manager for South Central Connecticut Know How to Go: South Central Connecticut Phone: 203-365-8522 Website: knowhowtogoscct.org</p> <p>A mobility manager is a resource person with information about transportation options for people with disabilities, seniors, and veterans. They do not provide the transportation. When using a mobility manager please plan ahead.</p>	<p>Serving: Bethany, Branford, Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, East Hampton, East Haven, Essex, Guilford, Haddam, Hamden, Killingworth, Lyme, Madison, Meriden, Middlefield, Middletown, Milford, New Haven, North Branford, North Haven, Old Lyme, Old Saybrook, Orange, Portland, Wallingford, Westbrook, West Haven, Woodbridge.</p>

Utilities Assistance

Organization Information	Brief Description
<p>Connecticut Energy Assistance Program (CEAP): Community Renewal Team Energy Assistance Program 44 Hamlin Street Middletown, CT 06457 (860) 347-4465</p>	<p>CRT administers the Connecticut Energy Assistance Program (CEAP) and the Contingency Heating Assistance Program (CHAP) to help low income households pay their heating bills. CRT also administers the Weatherization Program for CEAP/CHAP recipients.</p> <p>Service locations: Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Haddam, Killingworth, Marlborough, Middlefield, Middletown, Old Saybrook, Portland, among other locations.</p>
<p>Middletown, City of - Equal Opportunity & Diversity Management Office - Walter C Jones Fund 245 deKoven Drive Middletown, CT 06457 (860) 638- 4830 https://www.icarol.info/ResourceView2.aspx?org=2385&agencynum=17298547</p>	<p>Temporary financial assistance with rent arrearage of one month or 50% of a utility bill. Applicant must have sustainable income. Income considerations are: employment, social security, disability, child support, state cash assistance, etc. Fund has a once in a lifetime limit.</p>
<p>St. Vincent de Paul Middletown Middlesex United Way Operation Fuel Intake Site 617 Main Street</p>	<p>St. Vincent de Paul Middletown serves as one of 61 fuel banks across the state of Connecticut. Operation Fuel is a private, nonprofit statewide program offering emergency energy</p>

<p>Middletown, CT 06457 (860) 344-0097 http://www.svdmiddletown.org/ https://www.middlesexunitedway.org/middlesex-united-way-operation-fuel-can-help-families-energy-bills</p>	<p>assistance to low income, working poor, elderly and disabled households who are ineligible for government assistance. This crisis intervention program assists families facing emergency energy assistance to keep a family warm during the coldest winter months.</p>
<p>Note: while the below organizations are outside of the Middlesex Health geographic service area, they are being included as helpful resources.</p>	
Organization Information	Brief Description
<p>Connecticut Lifeline Discount Program Frontier Communications One Science Park, 1st Floor New Haven, CT 06511 (800) 842-1514 https://frontier.com/resources/discountprograms/lifelineprogram/connecticut</p>	<p>Frontier is committed to helping qualified low-income individuals pay for telephone or qualified internet services. Lifeline service is a non-transferable (from one person to another) government assistance program that provides a discount on the cost of monthly telephone or qualified internet access service. Lifeline is limited to one discount per household and only eligible customers may enroll. To receive the Lifeline discount of \$9.25 per month, you must certify that you or someone in your household currently receives benefits from one of these programs:</p> <ul style="list-style-type: none"> • Medicaid (also known as Husky Health) • Supplemental Nutrition Assistance Program (SNAP) formerly Food Stamps • Supplemental Security Income (SSI) • Federal Public Housing Assistance (Section 8) • VA Veterans Pension (Supplemental Income for Wartime Veterans) • VA Survivors Pension
<p>Eversource Energy PO Box 270 Hartford, CT 06141 (800) 286-5844 http://www.eversource.com/</p>	<p>Eversource Energy is the new name for the utility companies formerly known as Connecticut Light & Power (CL&P) and Yankee Gas. Eversource offers the following programs to help offset utility costs (gas/electric):</p> <ul style="list-style-type: none"> • Matching Payment Program (MPP) • New Start Arrearage Forgiveness Program • Winter Protection/Winter Moratorium • Year Round Protection for Life-threatening Situations • Home Energy Solutions • Budget Billing

Veterans Services

Organization Information	Brief Description
<p>Benefits</p>	
<p>Connecticut Department of Veterans' Affairs 287 West Street, Building 7 Rocky Hill, CT 06067 (860) 721-5893 https://portal.ct.gov/dva</p>	<p>Benefits information Programs and Services Veterans links</p>

<p>Connecticut Department of Veterans Affairs Office of Advocacy and Assistance 287 West Street Rocky Hill, CT 06067 (860) 616-2360 Eligibility: Veterans and veterans' families District Offices:</p> <ul style="list-style-type: none"> • 1st District: 555 Willard Avenue, Newington, CT 06111; (860) 594-6604 or (860) 594-6606 • 2nd District: 100 Broadway, Norwich City Hall Room 305, Norwich, CT 06360; (860) 887-9162 • 3rd District: 70 West River Street, Milford, CT 06460; (203) 874-6711 	<p>Assists veterans, their eligible spouses and dependents in obtaining benefits under federal, state and local laws with Veteran Service Officers (VSOs) located in each Congressional District.</p> <ul style="list-style-type: none"> • 1st District: Cromwell, Middletown, Portland • 2nd District: Chester, Clinton, Colchester, Deep River, East Haddam, East Hampton, Essex, Killingworth, Lyme, Marlborough, Old Lyme, Old Saybrook and Westbrook • 3rd District: Durham, Haddam, Middlefield and Middletown
Housing	
<p>State of Connecticut Veteran's Home 287 West Street Rocky Hill, CT 06067 (860) 529-2571</p>	<p>The residential facility at the Veterans' Home at Rocky Hill offers a continuum of rehabilitative services designed to ultimately prepare veterans for their return, if possible, to independent living in the community.</p>
<p>Military Homeownership Program 999 West Street Rocky Hill, CT, 06067 (860) 721-9501 or (844) CT1-HOME (toll free)</p>	<p>Offers low interest 30-year fixed-rate home mortgage loans to assist veterans and active service with the purchase of their first home. Program funds are limited and are available on a first-come, first-served basis.</p>
<p>Shepard Home – Access through the CAN Administered by Columbus House Inc. 282 Main Street Ext. Middletown, CT 06457</p>	<p>Access through 2-1-1 Coordinated Access Network (CAN) system. Located at 112 Bow Lane in Middletown, CT. 32 units of permanent supportive housing with a preference for Veterans experiencing homelessness.</p>
Additional Resources	
<p>Military OneSource 375 Smith Street Middletown, CT 06457 (800) 342-9647 http://www.militaryonesource.mil/</p>	<p>A call center and a website, providing free, comprehensive information and resources on every aspect of military life to service members (regardless of activation status), their families and survivors. Eligibility for this program is primarily for active service members and their family members and up to 365 days after end of service (retirement, discharged) unless under the service of a wounded warrior or seriously ill or injured program.</p>
<p>Hartford Veteran Center 25 Elm Street, Suite A Rocky Hill, CT 06067 (860) 563-8800</p>	<p>Counseling and readjustment services for Veterans who suffer from PTSD or MSD.</p>
<p>Veterans Application for Tax Exemption Tax Assessor Town specific</p>	<p>Veterans, who have ninety (90) days of wartime service, including Merchant Marines who served during WWII, are eligible for a \$1,500 exemption for property tax purposes (e.g., real estate property or automobiles). An exemption is the reduction of the property's assessed value for tax purposes. (CGS Sec. 12-81). Veterans are encouraged to go to the tax office in their town of residence to apply.</p>

<p>Soldiers, Sailors, and Marines' Fund Calvin Bunnell (860) 681-9464 Calvin Hilton (860) 347-9194 Middletown American Legion Post (860) 347-9575 Information (Main Number): (860) 296-0719 Administrator, Charles R. Berry: (860) 296-0719 Toll Free Number: (844) 454-8900 Fax: (860) 296-0820 864 Wethersfield Avenue Hartford, CT 06114-3184 http://www.alctssmf.org/</p>	<p>The Connecticut Soldiers, Sailors, and Marines Fund was established in 1919 to assist needy wartime veterans and their families. It is administered by the American Legion in accordance with the provisions of the Connecticut General Statutes, Sections 27-138 and 27-140, and is governed under the Bylaws of the American Legion Department of Connecticut.</p>
<p>Disabled American Veterans of Connecticut - DAV 35 Cold Spring Road, Suite 315 Rocky Hill, CT 06067 (860) 529-1759</p>	<p>Mission: We are dedicated to a single purpose: empowering veterans to lead high-quality lives with respect and dignity. We accomplish this by making sure veterans and their families can access the full range of benefits available to them; fighting for the interests of America's injured heroes on Capitol Hill and educating the public about the great sacrifices and needs of veterans transitioning back to civilian life.</p>
<p>Note: while the below organizations are outside of the Middlesex Health geographic service area, they are being included as helpful resources.</p>	
Organization Information	Brief Description
<p>U.S. Department of Veterans' Affairs 555 Willard Ave. Newington, CT 06111 (800) 827-1000 or (860) 666-6951 https://www.connecticut.va.gov/</p>	<p>Benefits information Programs and Services Veterans links Ambulatory Care Center</p>
<p>Benefits CheckUp National Council on Aging https://www.benefitscheckup.org/</p>	<p>A Benefits CheckUp is a free and confidential questionnaire that will screen you for eligibility for federal, state and local financial programs for individuals 60+ and those receiving Medicare at any age. Also links to Veterans services, if eligible.</p>
<p>U.S. Department of Veteran's Affairs 1) QuitVET: VA's tobacco quitline 1-855-QUIT-VET (1-855-784-8838) In English and Spanish Call between 9 a.m. and 9 p.m. ET, Monday through Friday. 2) SmokefreeVET: VA's quit tobacco text messaging program For English, Text VET to 47848 or visit smokefree.gov/VET to sign up for SmokefreeVET For Spanish, text VETesp to 47848 or visit https://veterans.smokefree.gov/tools-tips-vet/smokefreevetesp</p>	<p>Smoking cessation services.</p>
<p>VA Connecticut Healthcare System Smoking Cessation Program for Veterans 555 Willard Avenue Newington, CT 06111 (860) 666-6951</p>	<p>Offers smoking cessation programs for veterans. Family members may accompany veteran for assistance and support.</p>

<p>The Connecticut Veteran’s Directed Home & Community Based Services Program Senior Resources - Agency on Aging 19 Ohio Avenue Norwich CT 06360 (860) 887-3561 http://www.seniorresourcesec.org/</p>	<p>The VDHCBS Program is a consumer directed home and community based services program designed to keep veterans in their communities. Veterans served through this program have the opportunity to self-direct their own care and receive services in their home from the caregiver of their choice.</p>
<p>Office for Veterans Workforce Development 200 Folly Brook Boulevard Wethersfield, CT 06109 (860) 263-6000 https://www.ctdol.state.ct.us/veterans/ and https://www.ctdol.state.ct.us/veterans/vetreprs.htm</p>	<p>Connecticut Department of Labor; local veterans employment representatives assist veterans with employment and training needs. Is responsible for veterans programs in the local employment offices and offers case management and counseling services to Veterans. Conducts workshops, such as resume/cover Letters, Job search and internet.</p>
<p>Employer Support of the Guard and Reserve 360 Broad Street Hartford, CT 06105 (860) 524-4970 http://www.esgr.mil/About-ESGR/Contact/Local-State-Pages/Connecticut.aspx</p>	<p>A Department of Defense office. Dedicated and trained volunteers, staff – who develop and promote employer support for Guard and Reserve service by advocating relevant initiatives, recognizing outstanding support, increasing awareness of applicable laws, and resolving conflict between employers and service members.</p>
<p>Military Support Program 410 Capitol Avenue 4th Floor Hartford. CT 06134 (866) 251-2913 https://www.ct.gov/dmhas/cwp/view.asp?a=3833&q=453942</p>	<p>Provides statewide outpatient counseling to veterans, including reserve component service members and their families, that is free, confidential, and locally available. Veterans and their family members may access support for marriage and family issues, depression, anxiety, substance abuse and co-occurring disorders, trauma-related problems, as well as issues affecting children and adolescents.</p>
<p>Connecticut Veteran Legal Center 114 Boston Post Road West Haven, CT 06516 (203) 794-4291 http://ctveteranslegal.org/</p> <p>Also, Newington and Rocky Hill locations.</p>	<p>The mission of Connecticut Veterans Legal Center is to help veterans recover from homelessness and mental illness overcome legal barriers to housing, healthcare and income.</p> <p>In 2014, CVLC added the VA CT's Newington campus as a second VA medical-legal partnership location for on-site services. In 2017, CVLC added CT's Department of Veterans Affairs in Rocky Hill as its third site.</p>
<p>The DMHAS Veterans Recovery Center (VRC) 287 West Street Rocky Hill, CT 06067 (860) 616-3832 https://www.ct.gov/dmhas/lib/dmhas/veteransservices/vrcbrochure.pdf</p>	<p>Designed to assist and support eligible Veterans with substance use disorders with their recovery needs. The VRC interfaces with other services provided on the grounds of the DVA, whose primary focus is on educational and vocational referrals, employment counseling, and job placement assistance. The VRC offers outpatient services along with an optional four week Intensive Outpatient Program (IOP) with twelve hours required per week.</p>

YMCA's

Organization Information	Brief Description
<p>Middlesex YMCA 99 Union Street Middletown, CT 06457 (860) 347-6907 http://www.midymca.org/</p>	<p>Mission: The Northern Middlesex YMCA offers a path toward a fuller more productive life. The Middlesex YMCA provides high quality programs, services, and facilities that improve individual and family life, encourage healthier lifestyles and assist youth in developing into responsible adulthood. Programs Include: Youth Development; Healthy Living; Social Responsibility.</p>
<p>Valley Shore YMCA 201 Spencer Plain Road Westbrook, CT 06498 (860) 399-9622 http://vsmca.org/</p>	<p>Offers Programs that promote: Youth Development; Healthy Living; and Social Responsibility.</p>

Youth & Family Services

Organization Information		
<p>Clinton Youth & Family Services 48 E Main Street Clinton, CT 06413 (860) 669-1103 https://clintonct.org/206/Youth-Family-Services</p>	<p>Colchester Youth and Family Services 127 Norwich Avenue Colchester, CT 06415 (860) 537-7255 http://www.colchesterct.gov/Pages/ColchesterCT_Dept/YSB/index</p>	<p>Cromwell Youth Services Town Hall 41 West Street Cromwell, CT 06416 (860) 632-3448 https://www.cromwellct.com/youth-services</p>
<p>Tri-Town Youth Services Bureau 56 High Street Deep River, CT 06417 (860) 526-3600 http://www.tritownys.org/ Serves Chester, Deep River and Essex, CT</p>	<p>Durham Middlefield Youth Services 405 Main Street, #11 Middlefield, CT 06455 (860) 349-0258 http://www.dmyfs.org/</p>	<p>East Haddam Youth & Family Services 387 E Haddam Moodus Road Moodus, CT 06469 (860) 873-3296 http://ehyfs.org/</p>
<p>East Hampton Youth and Family Services 240 Middletown Avenue East Hampton, CT 06424 (860) 267-7300 https://www.easthamptonct.gov/youth-family-services</p>	<p>Child & Family Agency of Southeastern CT Child Guidance Clinic Campus 190 Westbrook Road Essex, CT 06426 (860) 767-0147 http://www.childandfamilyagency.org/</p>	<p>Youth & Family Services of Haddam-Killingworth, Inc. P.O. Box 432 91 Little City Road Higganum, CT 06441 (860) 345-7498 http://www.hkyfs.org/</p>
<p>Lyme Youth Services Bureau 59 Lyme Street Old Lyme, CT 06371 (860) 434-7208 http://lysb.org/</p>	<p>Andover Hebron Marlborough (AMH) Youth Services 25 Pendleton Drive Hebron, CT 06248 (860) 228-9488 http://ahmyouth.org/</p>	<p>Middletown Youth Services Bureau 372 Hunting Hill Avenue Middletown, CT 06457 (860) 854-6030 https://www.middletownct.gov/422/Youth-Services-Bureau</p>
<p>Town of Old Saybrook Youth and Family Services 322 Main Street Old Saybrook, CT 06475 (860) 395-3190</p>	<p>Portland Town Youth Services 265 Main Street Portland, CT 06480 (860) 342-6758 https://www.portlandct.org/youth-</p>	<p>Westbrook Youth and Family Services 1163 Boston Post Road Westbrook, CT 06498 (860) 399-9239 http://www.wyfs.org/</p>

https://www.oldsaybrookct.gov/youth-and-family-services	services	
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Youth Enrichment Programs

Organization Information	Brief Description
<p>4-H Education Programs University of Connecticut Cooperative Extension - Middlesex County Extension Center 1066 Saybrook Road Haddam, CT 06438 (860) 345-4511 http://www.extension.uconn.edu/</p>	<p>Offers youth development programs through 4-H groups, and work-at-home learning projects through Discover 4-H program. Also offers residential and day 4-H youth development camps.</p> <p>Eligibility: Age 7-19 for 4-H groups; Age 7-12 for Discover 4-H; Age 5-15 for youth development camp</p> <p>Service Areas: Middlesex County</p>
<p>Civil Air Patrol Cadet Program Civil Air Patrol - Connecticut Wing Beers Hall, 4th Floor Middletown, CT 06457 (860) 262-5847 http://www.ctwg.cap.gov/</p>	<p>Cadet program provides leadership training, technical education, scholarships and career education to youth ages 12 through 21.</p> <p>Eligibility: Ages 12 through 21</p>
<p>KIDCITY - Middletown 119 Washington Street Middletown, CT 0457 (860) 347-0495 http://www.kidcitymuseum.com/</p>	<p>A children's museum with three floors of imagination play, where kids ages 1 to 7 play pretend with their favorite grown-ups. Exhibits are handmade and one-of-a-kind, built by in-house artists who love inspiring playfulness in visitors of all ages. Annual Membership or at door prices for non-members. Reduced at door pricing for SNAP EBT card holders.</p>
<p>MacDonough School Family Resource Center 66 Spring Street, Middletown, CT 06457 (860) 638-3742 https://www.middletownschoools.org/departments/family_resource_center</p>	<p>Center offers activities for children and youth.</p> <p>Eligibility: Resident of MacDonough or Farm Hill School district</p>
<p>Marine Discovery/Marine Science Extraordinaire/Marine Explorer 203 Ferry Road Old Saybrook, CT 06475 (860) 388-4180 http://maritimeeducation.org/ Cost: Set Fee</p>	<p>Promotes environmental awareness and positive social development through programs in marine science, sailing technology and seamanship. Cooperative learning programs bring children from geographically and culturally diverse backgrounds together to explore Long Island Sound and its watershed.</p> <p>Eligibility: Marine Discovery: Grades 1-4; Marine Explorer: Grades 5-9</p>
<p>Middletown Summer Youth Employment Program Middlesex County Chamber of Commerce 393 Main Street Middletown, CT 06457 860-347-6924 https://www.middlesexchamber.com/pages/YouthPrograms</p>	<p>Placement for summer employment for six weeks, 20 hours per week. Host sites include the public sector, the non-profit sector, and the private sector. This program teaches young people the fundamentals of employment. For students to be eligible for employment through this program, proof must be provided that he or she is either enrolled in the free or reduced meals program at a local public school, or prove that their total family income falls within 185% of the poverty level in the State of Connecticut. Program applications are available at all of the</p>

	<p>local high schools and middle schools, at the Middletown Youth Services Bureau, at the centrally located Middlesex County Chamber of Commerce, at Middletown City Hall and at other locations throughout the city.</p>
<p>Middlesex County Substance Abuse Action Council 393 Main Street, 2nd flr Middletown, CT 06457 (860) 347-6924</p>	<p>Program offers workshops and seminars designed to build leadership and prevention skills, to Middlesex County high school students.</p> <p>Eligibility: Middlesex County high school students</p>
<p>Middletown Family Resource Centers Farm Hill School Family Resource Center 372 Hunting Hill Avenue Middletown, CT 06457 (860) 854-6030 https://www.middletownschoools.org/departments/family_resource_center</p>	<p>Offers a variety of youth positive youth development programs and activities.</p> <p>Eligibility: Resident of Middletown</p>
<p>Oddfellows Playhouse Youth Theater 128 Washington Street Middletown, CT 06457 (860) 347-6143 www.oddfellows.org Eligibility: Ages 5 and up Cost: Fees set for each program</p>	<p>Performing arts center offers classes, workshops, mini-productions, mainstage shows and special events for youth ages 5 and older. Programs use the performing arts as a means to enhance young people's self-confidence and communication skills, promote awareness of cultural diversity, and develop a sense of personal responsibility. Scholarships are available.</p>
<p>STEAM Train P.O, Box 2321 Middletown, CT 06457 (860) 398-9061 https://www.steamtraininc.org/</p> <p>STEAM Train is a non-profit organization that is committed to moving generations, especially underserved, under resourced, and underrepresented populations, to careers in science, technology, engineering, mathematics, and beyond.</p> <p>Science Technology Engineering Arts (digital) Math</p>	<p>STEM Camp - Ages 3-12 A week-long camp that introduces youth ages pre-school to 6th grade to STEM careers. Held in conjunction with Adventures in Learning, students are exposed to hands-on scientific experiments, computer technology, engineering disciplines, multimedia, and gain mastery of mathematics as a skill that is fundamental to STEM.</p> <p>Mobile Application Development (MAD) Programming Camp - Ages 13-19 A week-long programming camp that trains participants 13 years and older on the fundamentals of programming and the basics of developing applications for mobile devices. Students develop a functioning app for different mobile platforms. The coding camp is held at Middlesex Community College.</p> <p>STEAM Bound - Ages 13-18 A 7-week program is a collaboration between STEAM Train & UPWARD BOUND MATH SCIENCE(UMBS) of Wesleyan University. The goal to enrich the existing offering to the UBMS participants by providing specific exposure to the disciplines of STEAM.</p> <p>STEAM Machine (Starting in 2020) An after-school program offered at Farm Hill Elementary School to provide exposure to the disciplines of STEAM so students can develop critical thinking skills and discover the wonders of science, technology, engineering, digital arts, and mathematics.</p>

<p>Workforce Alliance American Job Center 272 South Main Street Middletown, CT 06457 (860) 347-7691 (203) 624-1493 ext 210 (VOICE/TTY) https://www.workforcealliance.biz/youth-and-young-adults/summer-youth-employment/</p>	<p>Program partners with community based agencies to provide positive youth development for in-school and out-of-school youth that results in employment or leads to post-secondary education.</p> <p>Eligibility: Youth programs are for ages 14 through 21 who are low income AND who have at least one barrier to employment; A small percentage are not subject to income restrictions; Barriers to employment for youth include low literacy, high school dropout, teen parent, judicial offender, runaway, or other specified barrier.</p> <p>Service Area: Chester, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Haddam, Killingworth, Middlefield, Middletown, Old Saybrook, Portland, Westbrook, Madison, Lyme, Old Lyme, Meriden</p>
<p>YMCA - Middlesex 99 Union Street Middletown, CT 06457 (860) 347-6907 http://www.midymca.org/</p>	<p>Swimming, games, sports and holiday/vacation recreation programs for children.</p>
<p>YMCA - Valley Shore 201 Spencer Plains Road Westbrook, CT 06498 (860) 399-9622 http://www.vsymca.org/ Cost: Nominal Fees; Financial Assistance Available</p>	<p>Children ages 8 through 12 may participate in Kids Night Out held every Friday evening.</p> <p>Service Area: Centerbrook, Ivorton, Northford, Hadlyme, South Lyme, Deep River, Westbrook, North Branford, Old Saybrook, Old Lyme, Chester, Madison, Clinton, Essex, Branford, Guilford, Killingworth, Lyme</p>

RESOURCES TO ADDRESS SIGNIFICANT HEALTH NEEDS – Clinical & Support Services

These community resources represent assets for broad health and health-related needs, including resources for the significant health and health-related needs identified in this CHNA.

Autism Services

Organization Information	
Offers Behavioral Assessment, Treatment Plan, and Direct Intervention	
<p>Able LLC - BCBA Group 4 Laconia Drive Clinton, CT (860) 326-9711</p>	<p>Able Home Health Care, LLC 15 Taylor Place Westport, CT 06880 (203) 529-5123 Areas Served: Statewide, dependent on staffing</p>
<p>Adelbrook Community Services, LLC 58 Missionary Road Cromwell, CT (860) 635-6010, extension 328 Areas Served, dependent on staffing: Middlesex County; Tolland County; New London County</p>	<p>Alternative Services - Connecticut, Inc. (ASI) 84 Linwood Avenue Colchester, CT (860) 942-8270, extension 22 Areas Served. dependent on staffing: Middlesex County; Hartford County; Tolland County; New London County</p>
<p>Connec to Talk LLC, BCBA Grp 145 Durham Road, Suite 9 Madison, CT 06443 (203) 210-7124</p>	<p>Creative Potential, LLC 154 Hempstead Street, 1st Floor New London, CT (860) 961-7238 Areas served: Middlesex County; New London County; Windham County</p>
<p>Growing Potential Services, LPC Group 141 Hazard Avenue, Suites 2-6 Enfield, CT (860) 698-6077 Areas served: Hartford County; Middlesex County; Tolland County; Windham County</p>	<p>Patrick Liddle, LPC - Individual Practitioner 144 Union Street Deep River, CT (860) 682-5231 Areas Served: Middlesex County</p>
<p>Patrick O'Leary - BCBA- Solo Practitioner 15 Eastwood Drive Madison, CT 06443 (203) 228-8122</p>	<p>Patrick Russoillo, Ph.D. - Individual Practitioner 154 College Street Middletown, CT 06457 (860) 344-9694 Offers Diagnostic Evaluation</p>
<p>Shoreline Center for Autism and Developmental Disorders - BCBA and LPC Groups 377 Main Street West Haven, CT 06516 Areas served, dependent in staffing: Fairfield County; Hartford County; Middlesex County; New Haven County</p>	<p>The Reynolds Clinic 770 Saybrook Road Upper Building B Middletown, CT 06457 (860) 343-0227 https://www.reynoldsclinic.com/autism-spectrum-disorder- asd/</p>

	<p>Provides a complete range of diagnostic and treatment options including: Full evaluation; Counseling; Brain Mapping (qEEG); EEG Neurofeedback Training</p> <p><i>DOES NOT TAKE ANY TYPE OF INSURANCE</i></p>
<p>Wheeler Clinic Behavioral Health 20 Tuttle Place Middletown, CT 06457 (860) 793-3588 Offers Diagnostic Evaluation</p>	<p>Western CT Medical Group, Spec Group 14 Research Drive Bethel, CT (203) 739-7296 Areas Served: State of Connecticut</p>
Additional Services	
Organization Information	Brief Description
<p>The Ryan Woods Autism Foundation (RWAf) 123 West Street, #211 Cromwell, CT 06416 (860) 834-3018 https://ryanwoodsautismfoundation.org/</p>	<p>Mission: We focus on making the maximum positive effort for our community. Our 1/1 trained volunteers provide the momentum that helps us affect change. We provide solutions for teens/young adults with autism and other special needs that make a long-lasting difference in their lives.</p> <p>Services offered:</p> <ol style="list-style-type: none"> 1) Program #1: Advocacy at PPT Meetings; Parent/Support Meetings; Bridging the gap with food/warmth 2) Program #2: Camp RWAf every summer for the past 8 years
<p>ASRC - Autism Services & Resources Connecticut 101 North Plains Industrial Road Harvest Park Wallingford, CT 06492 (203) 265-7717</p>	<p>Mission: to provide lifelong access to opportunities for persons on the autism spectrum with the goal of being fully-included and participating members of their communities.</p> <p>Services & Programs: Social & Recreational Programs; Social Skills; Training & Workshops; Legislative Advocacy; Peer Mentoring.</p>
<p>Prism Autism Education & Consultation 160 Farmington Avenue Farmington, CT 06032 (860) 495-0126 https://www.prismautism.com/ Services: Middlesex County</p>	<p>Mission: To make long-term, socially significant improvements in the lives of children with autism spectrum disorders. We focus on creating lasting relationships with the children, their families, and teams. Utilizing the principles of Applied Behavior Analysis, we develop individualized curriculum including behavioral supports and training of those in the children's lives in order to increase their academic, language, and social successes.</p> <p>Offers intensive, comprehensive ABA programming. Expertise is in treating the very young (as young as 12 months) and newly diagnosed. In addition, still offer some in-home programming when outreach teams are available.</p>

Cancer Services

Organization Information	Brief Description
<p>Cancer Center Middlesex Health Middletown Campus 536 Saybrook Road Middletown, CT 06457 (860) 358-2000 middlesexhealth.org/cancer-center</p> <p>Shoreline Campus 250 Flat Rock Place Westbrook, CT 06498</p>	<p>Comprehensive services include:</p> <ul style="list-style-type: none"> • Comprehensive Breast Center • Total Lung Cancer Screening Program • Center for Survivorship • Integrative Medicine Program • Hereditary Risk Assessment Program • Disease-specific nurse navigators and support • Oncology social workers • Oncology dietitians • Oncology clinical trials
<p>Center for Oncology Rehabilitation Excellence (CORE) Middlesex Health Outpatient Center, 2nd Floor 534 Saybrook Road Middletown, CT 06457 (860) 358-2700 https://middlesexhealth.org/</p>	<p>The Center for Oncology Rehabilitation Excellence (CORE) is designed to help survivors stay as strong and independent as possible during treatment and to help them return to the activities they enjoy. CORE providers include physical, occupational and speech therapists.</p>
<p>Mayo Clinic Care Network Member Middlesex Health https://middlesexhealth.org/</p>	<p>Benefits of Middlesex Health’s Mayo Clinic Care Network membership that may impact oncology treatment decisions include:</p> <ul style="list-style-type: none"> • eConsults • eTumor Board participation • Collaborative research efforts • Patient education resources • Oncology programmatic health care consulting access

Child and Family Services

Organization Information	Brief Description
<p>ABC Women's Center 180 E Main St, Middletown, CT 06457 (860) 344-9292 https://abcwomenscenter.org/</p>	<p>Provides free and confidential pregnancy resources and services to women in the Middletown community. Supports for pregnancy and parenting decisions.</p>
<p>Child First Family Advocacy – Child & Family Services Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-3401 https://middlesexhealth.org</p>	<p>An intensive home based program that provides services to pregnant women as well as families with children birth to six years of age. Child First serves families facing challenges such as maternal depression, substance abuse, domestic violence, incarceration, and homelessness.</p>
<p>Circle of Security Family Advocacy – Child & Family Services Middlesex Health 28 Crescent Street Middletown, CT 06457</p>	<p>Circle of Security Parenting® (COS P) is a DVD-based, eight-session, attachment-centered parent education intervention. COS P groups center on improving the quality of the parent-child relationship.</p>

(860) 358-3401 https://middlesexhealth.org	
Community Health Center, Inc. 675 Main Street Middletown, CT 06457 (860) 347-6971 http://www.chc1.com/	Offers Pediatric services; Obstetrics and Gynecology (OBGYN) Services; Breastfeeding support; Community education groups for families with young children.
Early Head Start 300 Washington Street Middletown, CT 06457 (860) 704-0725	A federally funded, income eligibility based program, which supports parent and child development. The program brings health, social services and community resources to parents for their children. Services can begin prenatally or until the child is three years of age.
Enhanced Care Clinic/Outpatient Clinic Family Advocacy – Child & Family Services Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-3401 https://middlesexhealth.org	Assists the Department of Children and Families with the assessment and planning for both committed and non-committed children with psychiatric issues.
Parenting Support Services Family Advocacy – Child & Family Services Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org	A home-vising program for families with children 0-18 years-of-age to support and enhance positive family functioning. Families receive Triple P (Positive Parenting Program®) or Circle of Security Parenting© interventions along with case management services.
Family Medicine Middlesex Health 90 South Main Street Middletown, CT 06457 (860) 358-6300 https://middlesexhealth.org	Pediatric primary care.
Fit For Kids Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org	Fit for Kids connects children with a dietitian manager, who works with the child and family to give them the tools to make healthy life choices. The program includes setting goals; planning and shopping for healthy meals and snacks, even on a budget; learning ways to cook healthy meals; becoming more physically active.
Pregnancy & Birth Center Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org	Team of physicians, residents, nurses, technologists, lactation consultants and support staff for delivery.
Perinatal Case Management Family Advocacy – Child & Family Services Middlesex Health 28 Crescent Street	Provides services to pregnant and postpartum women regardless of age or income, including a prenatal risk assessment and referrals to prenatal care, behavioral health and substance abuse treatment as needed.

Middletown, CT 06457 (860) 358-3401 https://middlesexhealth.org	Provides supportive counseling and education about Husky, WIC, SNAP and TANF
School-Based Health Services Community Health Center, Inc. 675 Main Street Middletown, CT 06457 (860) 347-6971 https://www.chc1.com/	Health services in local schools.
Women, Infants, and Children (WIC) Program 28 Crescent Street Middletown, CT 06457 (860) 358-4070 (800)-741-2142 http://www.fns.usda.gov/wic/women-infants-and-children-wic https://middlesexhealth.org	WIC, the Women, Infants and Children Program, is a nutrition program that helps pregnant women and families with babies and young children eat well and stay healthy.

Chronic Disease

Organization Information	Brief Description
Asthma - AIR Middlesex Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/	An adult asthma program to help people better manage their asthma symptoms. The AIR Middlesex Program offers: individual one-on-one assessment; Advice on how to properly use their asthma medications; Advice on how to reduce or eliminate asthma triggers; A customized treatment plan and follow-up with the patient's health care provider.
Asthma - Little AIR Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/	A pediatric asthma program especially tailored for the unique needs of children with asthma. The Little AIR Program works collectively with the child, the child's parents and the health care providers.
Asthma - Putting on Aairs CT River Area Health District (CRAHD) 455 Boston Post Road, Suite #7 Old Saybrook, CT 06475 (860) 661-3300 http://www.crahd.org/community-health/putting-on-air-asthma-program/ Available to residents of the CRAHD District which includes: Old Saybrook, Clinton, Deep River, Haddam and Chester who suffer from asthma and/or have a child who suffers from asthma. In addition, the following Towns may also participate in the program: Essex, Westbrook, Killingworth, East Haddam, Durham, Middlefield, Middletown, Cromwell, Portland, East Hampton, Marlborough, Hebron and Colchester.	A regional asthma home assessment program for DPH Asthma Region 5. Putting on AIRS is a program designed to target the reduction of environmental asthma triggers in the home. With an individual's permission, an Asthma Educator and an Environmental Specialist will visit the home to assess the home for environmental triggers of asthma with additional extensive services provided, as needed. Cost: none. This program is provided at no cost and has been funded by the CT Department of Public Health.

<p>Chronic Obstructive Pulmonary Disease Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/</p>	<p>The COPD Care Management Program provides education about the care and treatment of COPD; understanding and using medications; addressing anxiety and depression; advising on relaxation techniques; counseling on diet and nutrition; and giving referrals for services such as smoking cessation or pulmonary rehabilitation.</p>
<p>Diabetes Care Education Program Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/</p>	<p>Including diabetes education and one-on-one diabetes care management; day and evening groups on diabetes management; Individualized nutrition counseling and meal planning (medical nutrition therapy); free monthly daytime support group meetings; instructions on how to check blood glucose levels and administering insulin.</p>
<p>Heart Failure Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/</p>	<p>For patients in the hospital as well as those who have been discharged home with the diagnosis of heart failure. Services include: symptom control; diet changes; medications; physical activity.</p>

Communicable Diseases

Organization Information	Brief Description
<p>Community Health Center - Center for Key Populations HIV/AIDS Management 33 Ferry Street Middletown, CT 06457 (860) 347-6971, extension 6098</p>	<p>Provide HIV testing, education, counseling, and treatment. Whether you are newly diagnosed with HIV, require ongoing treatment, or want to keep up with testing. HIV PrEP (Pre-exposure Prophylaxis) and PEP (Post Exposure Prophylaxis) available.</p>
<p>Community Health Center - Center for Key Populations Hepatitis C Management 33 Ferry Street Middletown, CT 06457 (860) 347-6971 extension 3914</p>	<p>Hepatitis C Screening is available to anyone at risk, including those born between 1945 and 1965. Treatment offered to anyone living with Hep C.</p>
<p>Middlesex Health Multispecialty Group - Infectious Disease 80 South Main Street Middletown, CT 06457 (860) 358-6878 250 Flat Rock Place Westbrook, CT 06498 (860) 358-6878</p>	<p>Specialists provide special insight and expertise regarding the diagnosis, treatment, and prevention of infections of all types including: HIV; chronic Hepatitis B and C; Lyme Disease; MRSA; sexually transmitted diseases; Tuberculosis; postoperative infections and many others.</p>

LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer/Questioning+) Services

Organization Information	Brief Description
<p>Kathryn W. Tierney, MSN, APRN-BC, FNP Middlesex Health MultiSpecialty Group 80 South Main Street, Suite 304 Middletown, CT 06457 (860) 358-6875 https://middlesexhealth.org/</p>	<p>Experience in the management of transgender hormone therapy.</p>
<p>Angel Roubin, PsyD, LPC Middlesex Health Center for Behavioral Health Transgender Medicine Program Navigator 21 Pleasant Street Middletown, CT 06457 (860) 358-6000 (new patients - first appointment call 860-358-8825) https://middlesexhealth.org/</p>	<p>Transgender navigator, Dr. Roubin, works with patients and their unique needs. Assists with navigation of the many decisions about hormone replacement therapy and gender transition surgery. Assists with identifying providers who are familiar with the needs of transgender patients and who have the right background to meet the clinical needs of the transgender community.</p>
<p>Middlesex Health Psychiatry 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org/</p>	<p>Trans-competent providers in psychiatry.</p>
<p>Middlesex Health Gender Transition Surgery (Plastic Surgery, Urology, Gynecology) 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org/</p>	<p>Surgical specialists in gynecology, urology, and plastic surgery bring expertise, experience and compassion to a host of feminizing and masculinizing surgical procedures for transgender patients.</p>
<p>Middlesex Health Physical Rehabilitation 28 Crescent Street Middletown, CT 06457 (860) 358-2700 https://middlesexhealth.org/</p>	<p>Provides a number of services that may be helpful to the transgender person. Hormone therapies, medications or gender transition surgery can sometimes result in problems with movement, ongoing pain or bladder issues. The Department offers several programs to help with these issues. All of our locations have private spaces for you and your therapist(s) to work on helping you feel better and aiming for the best outcome.</p>
<p>Community Health Center - Middletown Center for Key Populations - LGBTQ 33 Ferry Street Middletown, CT 06457 (860) 347-6971, extension 3900 email: CKP@chc1.com https://centerforkeypopulations.com/</p> <p>General Inquiries: (860) 347-6971, extension 6098</p> <p>LGB or Transgender Behavioral Health (203) 447-8304</p>	<p>Dedicated to providing comprehensive and respectful care to our LGBT community! Everyone of any sexual orientation and gender identity are welcome.</p> <p>Provides:</p> <ul style="list-style-type: none"> ● gender-affirming hormone therapy, ● PrEP, ● sexual risk assessment and testing ● primary care ● behavioral health ● dental care ● HIV care, ● Hepatitis C care, and ● substance use management among other services

Hospitals & Federally Qualified Health Centers (FQHC)

Organization Information	Brief Description
<p>Community Health Center, Inc. (FQHC) 675 Main Street Middletown, CT 06457 (860) 347-6971 http://www.chc1.com/</p>	<p>CHC operates in 16 primary care hub/cities and more than 200 service locations across the state of Connecticut. CHC uses an Integrated Model of Care, where medical, dental, and behavioral health care are brought together under one roof.</p>
<p>Connecticut Valley Hospital (CVH) 1000 Silver St, Middletown, CT 06457 (860) 262-5000 https://www.ct.gov/dmhas/cwp/view.asp?q=416778</p>	<p>Operated by the state of Connecticut. Provides services to persons with psychological and addiction disabilities called. All of the services provided by CVH are designed with the concept of "Recovery to Wellness" as their operational framework. Individuals acquire and practice life skills that will assist them in their recovery process.</p>
<p>Middlesex Hospital Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org/</p>	<p>An independent, not-for-profit, acute-care community hospitals located in Middletown, CT. Middlesex Health services include inpatient and emergency services and extensive outpatient care services. Middlesex Health operates two satellite medical centers in Westbrook and Marlborough that have fully accredited, stand-alone emergency departments.</p>

Medical Services (Additional) – Middlesex Health

Service	Service	Service
<p>Middlesex Hospital 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org/</p>	<p>Marlborough Medical Center 12 Jones Hollow Road Marlborough, CT 06447 (860) 358-3200</p> <p>Services Offered:</p> <ul style="list-style-type: none"> - 24/7 Emergency Care - Paramedic Services - Laboratory Services - Diagnostic Imaging - Angiography - Bone Densitometry 	<p>Shoreline Medical Center 250 Flat Rock Place Westbrook, CT 06498 (860) 358-3700</p> <p>Services offered:</p> <ul style="list-style-type: none"> - 24/7 Emergency Care, including Paramedics and Helipad for LifeStar transport - Cancer Center - Chronic Care Management - Diagnostic Testing - Lab Services - Outpatient Infusion therapy - Pre-surgical testing
<p>Cardiac Rehabilitation 520 Saybrook Road, Suite 200 Middletown, CT 06457 (860) 358- 2450</p>	<p>Emergency Services - Middletown 28 Crescent Street Middletown, CT 06457 (860) 358-8000</p>	<p>Emergency Services – Marlborough Marlborough Medical Center 12 Jones Hollow Road Marlborough, CT 06447 (860) 358-3201</p>
<p>Emergency Services - Westbrook Shoreline Medical Center 250 Flat Rock Place Westbrook, CT 06498 (860) 358-3701</p>	<p>Family Medicine, East Hampton 42 East High Street, Suite 205 East Hampton, CT 06424 (860) 358-3500</p>	<p>Family Medicine, Middletown 90 South Main Street Middletown, CT 06457 (860) 358-6300</p>

	*In addition to Primary Care, this office offers specialties including Obstetrics, Pediatrics and Integrative Medicine.	*This office offers specialty clinics in Pediatrics and Obstetrics & Gynecology.
<p>Family Medicine, Portland 13 High Street Portland, CT 06480-1616 (860) 358-7100</p> <p>*This office offers specialty clinics in Pediatrics and Osteopathy.</p>	<p>Care at Home (Homecare) 770 Saybrook Road, Middletown, CT 06457 (860) 358-5600</p> <p>5 Pequot Park Road, Suite 204 Westbrook, CT 06498 (860) 358-5600</p> <p>Services offered: - Skilled nursing - Rehabilitation (physical, occupational, and speech therapies) - Home health aids - Social work - Palliative care - Hospice care - 24/7 on-call nurse</p>	<p>Hospice & Palliative Care - Inpatient 28 Crescent Street Middletown, CT 06457 (860) 358-6000</p>
<p>Laboratory Services Locations in: Marlborough - (860) 358-3270 Marlborough Medical Center 12 Jones Hollow Road Marlborough, CT 06447</p> <p>Middletown - (860) 358-2680 Outpatient Center 534 Saybrook Road Middletown, CT 06457</p> <p>Middletown - (860) 358-4710 Middlesex Hospital 28 Crescent Street Middletown, CT 06457</p> <p>Westbrook - (860) 358-3700 Shoreline Medical Center 250 Flat Rock Place Westbrook, CT 06498</p>	<p>Middlesex Multispecialty Group 80 South Main Street Middletown, CT 06457</p> <p>Services include: - Infectious Disease -(860) 358-6878 - Neurology & Stroke Treatment - (860) 358-5970 - Pulmonary Medicine - (860) 358-6878 - Rheumatology - (860) 358-8680 - Sleep Medicine -(860) 358-4615</p> <p>Multispecialty Group Endocrinology 240 Saybrook Road, Middletown, CT 06457 (860) 358-6875</p>	<p>Physical Rehabilitation Locations in: Essex Madison Marlborough Middletown Old Saybrook (860) 358-2700</p> <p>Services Offered: - Occupational Therapy - Physical Therapy - Speech-Language and Voice Therapy - Pelvic Health and Incontinence Rehabilitation - Fall Prevention & Balance Rehabilitation - Aquatic Therapy - Pulmonary Therapy - Persistent Pain Management - Orthopedic/Sports Medicine Rehab - Neurological Rehabilitation - Hand Therapy - Exercise Maintenance Program - Lymphedema Rehabilitation - Oncology Rehabilitation - McKenzie Method of Mechanical Diagnosis & Therapy</p>
<p>Middlesex Health Primary Care Locations in: Chester Cromwell Durham East Haddam Essex</p>	<p>Radiology - Diagnostic Imaging 800-281-5232 or (860) 358-2600 Locations: Middlesex Hospital 28 Crescent Street Middletown, CT 06457 (860) 358-6000</p>	<p>Surgical Services Locations: Middlesex Hospital 28 Crescent Street Middletown, CT 06457 (860) 358-6000</p>

<p>Madison Middletown Old Saybrook Portland Shoreline Tri-Town Westbrook https://mhprimarycare.org/</p> <p>Services offered:</p> <ul style="list-style-type: none"> - Adolescent Care - Chronic Care Disease Management - Dermatology - Geriatrics - Internal Medicine - Interventional Medical Aesthetics - Pediatric Services - Sports Medicine - Women’s Health -GYN 	<p>Marlborough Medical Center 12 Jones Hollow Road Marlborough, CT 06447 (860) 358-3270</p> <p>Shoreline Medical Center 250 Flat Rock Place Westbrook, CT 06498 (860) 358-3700</p> <p>Services Offered:</p> <ul style="list-style-type: none"> - General X-Ray - CT Scan - 3D Mammography (Tomosynthesis) - Interventional Radiology - Nuclear Medicine - MRI - Ultrasound 	<p>Outpatient Surgi-Center 534 Saybrook Road Middletown, CT 06457 (860) 358-2800</p>
<p>Center for Advanced Surgery Locations: Middlesex Hospital 28 Crescent Street Middletown, CT 06457 (860) 358-6000</p> <p>Surgical Alliance - Marlborough 14 Jones Hollow Road, Suite 02 Marlborough, CT 06447 (860) 358-2780</p> <p>Surgical Alliance - Madison 1353 Boston Post Road Madison, CT 06443 (860) 358-2850</p> <p>Surgical Alliance - Westbrook 5 Pequot Park Road, Suite 203 Westbrook, CT 06498 (860) 358-2850</p> <p>Surgical Alliance - Middletown 540 Saybrook Road Suites 100A and 100B Middletown, CT 06457 (860) 358-2850</p> <p>Surgical Alliance - Westbrook Shoreline Medical Center 250 Flat Rock Place, 2nd Floor Westbrook, CT 06498 (860) 358-2780</p> <p>Surgical Specialties:</p> <ul style="list-style-type: none"> - Colorectal Surgery - Comprehensive Breast Center - daVinci® Robot-Assisted Surgery - General Surgery - Gynecologic Surgery 	<p>The Center for Weight Loss Surgery 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org/weight-loss-surgery-the-center-for</p> <p>A comprehensive approach to weight management through:</p> <ul style="list-style-type: none"> - Education - Surgery when appropriate - Long Term Follow-up - Support Groups <p>Procedures:</p> <ul style="list-style-type: none"> - daVinci® Robot-Assisted Gastric Bypass - Laparoscopic Sleeve Gastrectomy - Gastric Banding Surgery 	<p>Urgent Care Hours: Monday - Friday 8am to 8pm Saturday & Sunday 8am to 4:30pm</p> <p>Locations:</p> <p>896 Washington Street Middletown, CT 06457 (860) 788-3632</p> <p>146 Samson Rock Drive Madison, CT 06443 (203) 779-5207</p> <p>1687 Boston Post Road Old Saybrook, CT 06475 (860) 661-5976</p>

<ul style="list-style-type: none"> - Minimally Invasive Surgery - Neurosurgery & Spinal Surgery - Surgical Oncology - Vascular Surgery 		
<p>Wound and Ostomy Center 520 Saybrook Road, Suite 201 Middletown, CT 06457 (860) 358-2880</p> <p>Services Offered:</p> <ul style="list-style-type: none"> - Wound Care - Ostomy Care - Diabetic Foot Care <p>Primary Wound Types Treated:</p> <ul style="list-style-type: none"> - Diabetic Foot Ulcers - Ischemic Ulcers - Stage 111 and IV Pressure Ulcers - Venous Stasis Ulcers 		

Medical Services (Additional) – Community Health Center, Inc.

Organization Information	Services
<p>Community Health Center, Inc. 675 Main Street Middletown, CT 06457 (860) 347-6971 http://www.chc1.com/</p>	<p>Services Include:</p> <ul style="list-style-type: none"> ● Behavioral Health ● Breastfeeding support ● Case management ● Chiropractic services ● Clinical pharmacy services ● Community education groups for families with young children ● Diabetes education ● Dental Services – adult and children ● Domestic violence services ● Hepatitis C treatment ● HIV Counseling, testing and treatment ● Homeless services ● Medication assisted treatment for opioid addiction ● Mobile services ● Nutrition counseling ● Obstetrics and Gynecology (OBGYN) ● Podiatry ● Prescription medication assistance ● Primary Care – adult and pediatric ● School-based health services ● Smoking cessation management ● Telephone-based disease management ● Quick Care -Same day access for minor illness/injury
<p>Community Health Center, Inc. 114 E Main Street Clinton, CT 06413 (860) 664-0787</p>	<p>See website: http://www.chc1.com/Locations/Clinton</p>

<p>Community Health Center, Inc. 263 Main Street, #202 Old Saybrook, CT 06475 (860) 388-4433</p>	<p>See website: http://www.chc1.com/Locations/OldSaybrook</p>
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Mental Health/Behavioral Health Services – Children & Adolescents

Organization Information	Brief Description
<p>CT Strong Community Health Center 33 Ferry Street Middletown, CT 06457 (860) 347-6971, ext 3920 www.chc1.com</p> <p>Eligibility: Young adults residing in Middletown ages 16-25 who have or are at risk for behavioral health disorders</p>	<p>DMHAS and DCF collaborative program offers services to young adults ages 16-25 who have or are at risk for behavioral health disorders. Program connects young adults to care through wraparound Services to help build constructive relationships and support networks among young adults and their families. Wraparound plans can address home, school, community, basic needs, safety, social, emotional, spiritual, educational and cultural needs.</p>
<p>Community Health Center 33 Ferry Street Middletown, CT 06457 (860) 347-6971 www.chc1.com</p> <p>Service Area: Middlesex County</p>	<p>Offers anger management classes for youth ages 13 through 18, Social Skills group for ages 4 through 7 and 8 through 12, a GLBT (gay, lesbian, bi-sexual, transgender) group for high school students, a Creative Arts Group for youth ages 13 through 17 who are having difficulty expressing themselves, and a drop-in group for teen girls ages 13 through 18.</p>
<p>Family Advocacy Middlesex Health 51 Broad Street Middletown, CT 06457 (860) 358-3401 https://middlesexhealth.org/</p>	<p>The Behavioral Health Outpatient Clinic offers families with children ages 5 through 18 services to meet their individual needs. Services include individual, family and group therapy settings as well as psychiatric evaluation and medication management. Psychological testing is available to current patients. Also provides psychiatric consultation for primary care providers and school personnel.</p>
<p>Intensive In-Home Child and Adolescent Psychiatric Service (IICAPS) Family Advocacy Middlesex Health 51 Broad Street Middletown, CT 06457 (860) 358-3401 https://middlesexhealth.org/</p>	<p>Intensive in-home services for families with children and adolescents experiencing serious emotional behavioral problems including those who are returning to family following hospitalization or out of home placement, children at risk of hospitalization and children for which outpatient services are not sufficient to allow the child to remain safely in the family.</p>
<p>Mobile Crisis Intervention (MCI) (formerly EMPS) Family Advocacy Middlesex Health 51 Broad Street Middletown, CT 06457 (860) 358-3401 https://middlesexhealth.org/</p>	<p>24-hour a day, 365-day a year telephone triage providing psychiatric crisis intervention service for children and their families. Mobile crisis in-person intervention available between 6 am-10 pm Monday - Friday, and 1 pm-10 pm on weekends and holidays.</p>

<p>The Sterling Center 26 Shunpike Road Cromwell, CT 06416 (860) 635-5700 http://www.thesterlingcenter.com/specialized-treatment</p>	<p>Specialized Treatment Services provides comprehensive specialized evaluations and treatment services to children and adolescents who have been the victims of maladaptive sexual behaviors at home or in the community. Services:</p> <ul style="list-style-type: none"> ● Psychosexual Assessments ● Risk Assessment ● Individual Treatment ● Play Therapy ● Group Treatment ● Good Touch - Bad Touch Training ● Boundary Sensitization and Training ● Trauma Treatment
<p>Well Life Therapy, LLC 79 Mill Street Middletown, CT 06457 (860) 258-6060 info@welllifetherapyllc.com https://welllifetherapyllc.com/</p>	<p>Specialize in treating children, teens, adults, couples and families. Specializations in depression & mood disorders, anxiety & stress management, life transitions (i.e., separation/divorce, retirement, loss, going away to college), women’s issues, working with college students, perinatal/postpartum mental health, relationships/intimacy issues, substance abuse and trauma recovery.</p>
<p>Natchaug Hospital - Joshua Center Shoreline 5 Research Parkway Old Saybrook, CT 06475 (860) 510-0163</p>	<p>Joshua Center Programs treat children as young as six and as old as 17 who are struggling with psychiatric or substance abuse issues, but do not require inpatient care.</p> <p>Services Include: Comprehensive assessment, which may include Comprehensive aftercare planning; Family, group, and individual therapy; Occupational and creative rehabilitation therapy.</p> <p>Natchaug Hospital provides transportation from school to the Joshua Center Program, and then to the student’s home</p>

Mental Health Services – Adults

Organization Information	Brief Description
<p>Advanced Behavioral Health, Inc. 213 Court Street Middletown, CT 06457 (860) 638-5309 http://www.abhct.com/</p>	<p>Behavioral health management including coordinating intake and referral services; integrating care and case management service delivery.</p>
<p>Behavioral Health Services Community Health Center, Inc. 675 Main Street Middletown, CT 06457 (860) 347-6971 http://www.chc1.com/</p>	<p>This care is integrated into medical services, to make sure patients are managing all aspects of their health in the best way possible. CHC’s behavioral health team includes psychologists, social workers, marriage and family therapists, drug and alcohol counselors, psychiatrists, and psychiatric APRNs. Offers trauma-informed therapy and addiction counseling, and works in partnership with the Department of Children and Families and the Department of Mental Health and Addiction Services to provide community-based care to families at risk of abuse and neglect.</p>

<p>Connecticut Valley Hospital General Psychiatry Division 1000 Silver Street Middletown, CT 06457 (860) 262-5529 Admissions: (860) 262-5515 https://www.ct.gov/dmhas/cwp/view.asp?q=416778</p>	<p>Public hospital operated by the state of Connecticut to treat people with mental illness.</p> <p>Vision Statement: To promote recovery through collaborative, compassionate, and culturally competent treatment in a safe and caring environment.</p> <p>Mission Statement: At Connecticut Valley Hospital, individuals receive services that assist them to better manage their illnesses, achieve personal goals, and develop skills and supports that lead to living the most constructive and satisfying lives possible.</p>
<p>The Connection Center for Behavioral Health 196 Court Street Middletown, CT 06457 (855) 435-7955 https://www.theconnectioninc.org/</p>	<p>Provides the latest and most innovative substance use and mental health treatment services for adults and families.</p> <p>Services provided include:</p> <ul style="list-style-type: none"> ● Evaluations ● Individual Psychotherapy ● Relapse Prevention ● Group Therapy ● Medication Management ● Intensive Outpatient
<p>Gilead Community Services 222 Main Street Extension P. O. Box 1000 Middletown, CT 06457 (860) 343-5300 http://gileadcs.org/</p>	<p>Serving individuals and families living with mental health needs in Middlesex County.</p> <p>Services include:</p> <ul style="list-style-type: none"> ● Outpatient Clinics ● Social Rehabilitation Center ● Community Services ● Apartment Services ● Residential Services ● Family Resources ● Mental Health First Aid ● Farrell Treatment Center – non-profit substance abuse facility
<p>Outpatient Center for Behavioral Health Middlesex Health - Center for Behavioral Health First Appointment (860) 358-8825 https://middlesexhealth.org/</p> <p>Other locations:</p> <ul style="list-style-type: none"> - 130 S Main Street, Middletown, CT, (860) 358-8760 - 80 South Main Street, Middletown, CT, (860) 358-6760 - 90 S Main Street, Middletown, CT - 154 Main Street. Old Saybrook, CT 	<p>Psychiatric Assessment and Treatment. Goal is to help patients face and overcome challenges related to mental and emotional health, substance abuse and recovery, identity, and more.</p> <ul style="list-style-type: none"> ● Medication Management ● Individual Therapy ● Classes or support groups ● Discharge support
<p>Day Treatment Program Middlesex Health 33 Pleasant Street Middletown, CT (860) 358-8801 Intake Coordinator (860) 358-8805 https://middlesexhealth.org/</p>	<p>Intensive outpatient services for adults, geriatric patients, and dually-diagnosed patients.</p> <ul style="list-style-type: none"> ● Partial Hospital Program (PHP) ● Adult Intensive Outpatient Program (IOP) ● Dual Diagnosis IOP ● Senior IOP

<p>Inpatient Psychiatric Unit Middlesex Health 28 Crescent Street Middletown, CT 06457 (860) 358-6000 https://middlesexhealth.org/</p>	<p>North 7 is the Adult Inpatient Psychiatric 20 bed unit providing treatment to people with mental and substance abuse diagnoses. Each patient has a comprehensive assessment and is provided an individual treatment plan. The unit is staffed with Psychiatrists, Nurses, Social Workers, Patient Care Technicians, Nurses, Occupational Therapists and more to meet the needs of the individual.</p>
<p>Rushford 1250 Silver Street Middletown, CT 06457 (860) 346-0300 https://rushford.org/locations/middletownn.org/</p>	<p>Inpatient and outpatient treatment for substance abuse and addiction for adult men and women. Services Offered:</p> <ul style="list-style-type: none"> ● Mental Health Treatment ● Adult Mental Health Treatment ● Adult Residential Addiction Treatment ● Adult Outpatient Addiction Treatment ● Adult Medication Assisted Treatment Close to Home ● Adult Detox ● Teen Medication Assisted Treatment Close to Home ● Rehabilitation
<p>River Valley Services Through Department of Mental Health & Addiction Services (DMHAS) 351 Silver Street Middletown, CT 06457 (860) 262-5200 https://www.ct.gov/dmhas/cwp/view.asp?a=2916&q=335354</p>	<p>Services Include:</p> <ul style="list-style-type: none"> ● The Mobile Response Team (MRT) ● Respite ● Community Support Program (CSP) ● Lower County Clinical Team (LCCT) ● Young Adult Services (YAS) ● The Transitional Treatment and Evaluation ● The Hospital/Community Liaison ● The Court Liaison Service ● The ASIST Program ● Client Rights Officer ● Shelter Plus Care ● RIDE Transportation Program ● Common Thread Warmline (CTWL)
<p>Mental Health Services – Older Adults</p>	
<p>Outpatient Center for Behavioral Health Middlesex Health - Center for Behavioral Health 130 S Main Street Middletown, CT 06457 First Appointment (860) 358-8825 (860) 358-8760 https://middlesexhealth.org/</p>	<p>Geriatric Psychiatric Assessment and Treatment.</p>
<p>Day Treatment Program For Seniors Middlesex Health 33 Pleasant Street Middletown, CT (860) 358-8801 Intake Coordinator (860) 358-8805 https://middlesexhealth.org/</p>	<p>Senior IOP: Patients attend the program three times per week. Services include group therapy, individual therapy, occupational therapy, recreational therapy, ongoing psychiatric evaluation, medication management, family therapy and care management.</p> <p>Senior IOP One Day Track: Patients attend the program once per week. Services include group therapy, individual therapy, occupational therapy, recreational therapy, ongoing psychiatric evaluation, medication management, family therapy and care management to sustain gains made in 3 day track.</p>

Nutrition Services

Organization Information	Brief Description
<p>Nutrition Counseling Community Health Center, Inc. 675 Main Street Middletown, CT 06457 (860) 347-6971 http://www.chc1.com/</p>	<p>Nutrition counseling services as part of integrative care. Nutritionists and dietitians at CHC can help patients create an affordable and delicious food plan.</p>
<p>Medical Nutrition Therapy Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/</p>	<p>The Center for Chronic Care Management offers a medical nutrition therapy program that helps patients define and monitor their diets for maximum health benefit.</p>
<p>Fit For Kids Center for Chronic Care Management Middlesex Health 770 Saybrook Road, Building B Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/</p>	<p>Fit for Kids connects children with a dietitian manager, who works with the child and family to give the tools to make healthy life choices. The program includes setting goals; planning and shopping for healthy meals and snacks, even on a budget; learning ways to cook healthy meals; becoming more physically active.</p>

Smoking Cessation Services

Organization Information	Brief Description
<p>Smoking Cessation Services Community Health Center of Middletown Community Health Center, Inc. 675 Main Street Middletown, CT 06457 (860) 347-6971 http://www.chc1.com/</p>	<p>Offers a smoking cessation program and support group.</p>
<p>Smoking Cessation Services Community Health Center of Clinton 114 East Main Street Clinton, CT 06413 (860) 664-0787 http://www.chc1.com/Locations/Clinton</p>	<p>Offers a smoking cessation program and support group.</p>
<p>Smoking Intervention Program Center for Chronic Care Management Middlesex Health 770 Saybrook Road Middletown, CT 06457 (860) 358-5420 https://middlesexhealth.org/</p>	<p>Services include individual counseling; wide range of treatment options; relapse prevention support; follow-up care; education; group support.</p>

Substance Use Disorder Services

Organization Information	Brief Description
<p>Community Health Center (CHC) Center For Key Populations - Substance Use Treatment 33 Ferry Street Middletown, CT 06457 (860) 224-3642, extension 5504 https://centerforkeypopulations.com/</p>	<p>Works with patients to manage their addiction and to adopt a healthy lifestyle. Combines Medication Assisted Treatment (MAT) with behavioral health and community support to create a treatment plan.</p>
<p>The Connection Center for Behavioral Health 196 Court Street Middletown, CT 06457 (855) 435-7955 (860) 343-5510 Helpline (855) 435-7955 https://www.theconnectioninc.org/</p>	<p>Provides substance use and mental health treatment services for adults and families. Services provided include:</p> <ul style="list-style-type: none"> ● Evaluations ● Individual Psychotherapy ● Relapse Prevention ● Group Therapy ● Medication Management ● Intensive Outpatient
<p>Connecticut Valley Hospital Addiction Services Division. Merritt Hall 1000 Silver Street Middletown, CT 06457 (800) 828-3396</p>	<p>Uses evidence based practices and a holistic approach to assist people receiving services in identifying and exploring issues that may be barriers to their recovery. Services provided are trauma sensitive and gender specific. Medication assisted treatment is also offered to appropriate candidates. Services Provided:</p> <ul style="list-style-type: none"> ● Medical management of withdrawal symptoms (methadone protocol available for opiate detox) ● Comprehensive psychiatric, medical, and psychosocial assessment ● Treatment of acute medical/psychiatric problems (including outside referrals, as necessary) ● Educational groups on addiction/recovery ● Development of a comprehensive aftercare/discharge plan that is supportive of the next stage of recovery
<p>Middlesex Health - Center for Behavioral Health 28 Crescent Street Middletown, CT 06457 (860) 358-8825 https://middlesexhealth.org/</p>	<p>Offers Medication Assisted Treatment (MAT) and mental health therapy to treat opioid use disorder and other substance use disorders.</p>
<p>Middlesex Health – Dual Diagnosis Program 33 Pleasant Street Middletown, CT 06457 (860) 358-8825 https://middlesexhealth.org/</p>	<p>Dual Diagnosis Partial Hospital and Intensive Outpatient programs for adults with a psychiatric disorder along with substance misuse.</p>
<p>Middletown Recovery Together - Ministerial Health Fellowship How Can We Help? (203) 443-7955 Middletown Recovery Together is a partnership between the Ministerial Health Fellowship, Middlesex Health, and</p>	<p>Recovery coaches support individuals who are struggling with opioid use disorder. Connects clients to needed services, including Medication Assisted Treatment (MAT). Includes support groups for individuals who are struggling. Also provides support for families, loved ones and friends of those struggling with opioid use disorder. Support groups for families, loved ones and friends as well.</p>

<p>Columbus House for the DMHAS "How Can We Help?" project.</p>	
<p>Middletown Recovery Together – Columbus House How Can We Help? 282 Main Street Ext. Middletown, CT 06457 (855) 626 3310</p>	<p>Recovery coaches support homeless individuals who are struggling with opioid use disorder. Connects clients to needed services, including Medication Assisted Treatment (MAT).</p>
<p>Rushford 1250 Silver Street Middletown, CT 06457 (860) 346-0300 https://rushford.org/locations/middletownn.org/</p> <p>325 Main Street Portland, CT 06480 (inpatient treatment)</p>	<p>Inpatient and outpatient treatment for substance abuse and addiction for adult men and women.</p> <p>Services Offered:</p> <ul style="list-style-type: none"> ● Mental Health Treatment ● Adult Mental Health Treatment ● Adult Residential Addiction Treatment ● Adult Outpatient Addiction Treatment ● Adult Medication Assisted Treatment Close to Home ● Adult Detox ● Teen Medication Assisted Treatment Close to Home ● Rehabilitation
<p>Rushford - Adult MATCH™ MATCH™ - Medication Assisted Treatment Close to Home (855) 825-4026 https://rushford.org/</p> <p>Locations: 1) 1250 Silver Street, Middletown, CT 06457 2) 883 Paddock Ave, Meriden, CT 06450</p>	<p>The program uses a combination of medication and therapy to help people into recovery from addiction to opioids, alcohol or other drugs.</p>
<p>Rushford - Teen MATCH™ Medication Assisted Treatment Close to Home (877) 577-3233 https://rushford.org/</p> <p>Locations: 1) 1250 Silver Street, Middletown, CT 06457 2) 883 Paddock Ave, Meriden, CT 06450</p>	<p>Rushford's continuum of substance abuse services for teens includes early intervention, evaluation and assessment, outpatient and residential treatment, and relapse prevention. Their programs utilize evidence based approaches, including The Seven Challenges® Program and GORSKI-CENAPS Model, in providing effective treatment for teen substance use and abuse.</p>
<p>Rushford - Older Adult Substance Abuse Outreach Program-South Central 1250 Silver Street Middletown CT 06457 (860) 852-1025 https://rushford.org/</p>	<p>Older adult substance abuse outreach coordinator for the South Central region does outreach, education and linkage to needed treatment providers for people ages 55+ who have alcohol or other drug addictions.</p>
<p>Fresh Start Program Waterstone Counseling Center 17 Wall Street Madison, CT 06443 (203) 245-0412 https://waterstonecenter.com/fresh-start-program/</p>	<p>Provide addiction treatment including medication management and person centered counseling.</p> <p>Services Provided:</p> <ul style="list-style-type: none"> ● Medication Assisted Therapy ● Medication Management ● Psychological Evaluation & Treatment ● Toxicology Screening ● Referral Services ● Support Services

<p>The DMHAS Veterans Recovery Center (VRC) 287 West Street Rocky Hill, CT 06067 (860) 616-3832 https://www.ct.gov/dmhas/lib/dmhas/veteransservices/vrcbrochure.pdf</p>	<p>Designed to assist and support eligible Veterans with substance use disorders with their recovery needs. The VRC interfaces with other services provided on the grounds of the DVA, whose primary focus is on educational and vocational referrals, employment counseling, and job placement assistance. The VRC offers outpatient services along with an optional four week Intensive Outpatient Program (IOP) with twelve hours required per week.</p>
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Middlesex Health
28 Crescent Street
Middletown, CT 06457
www.middlesexhealth.org