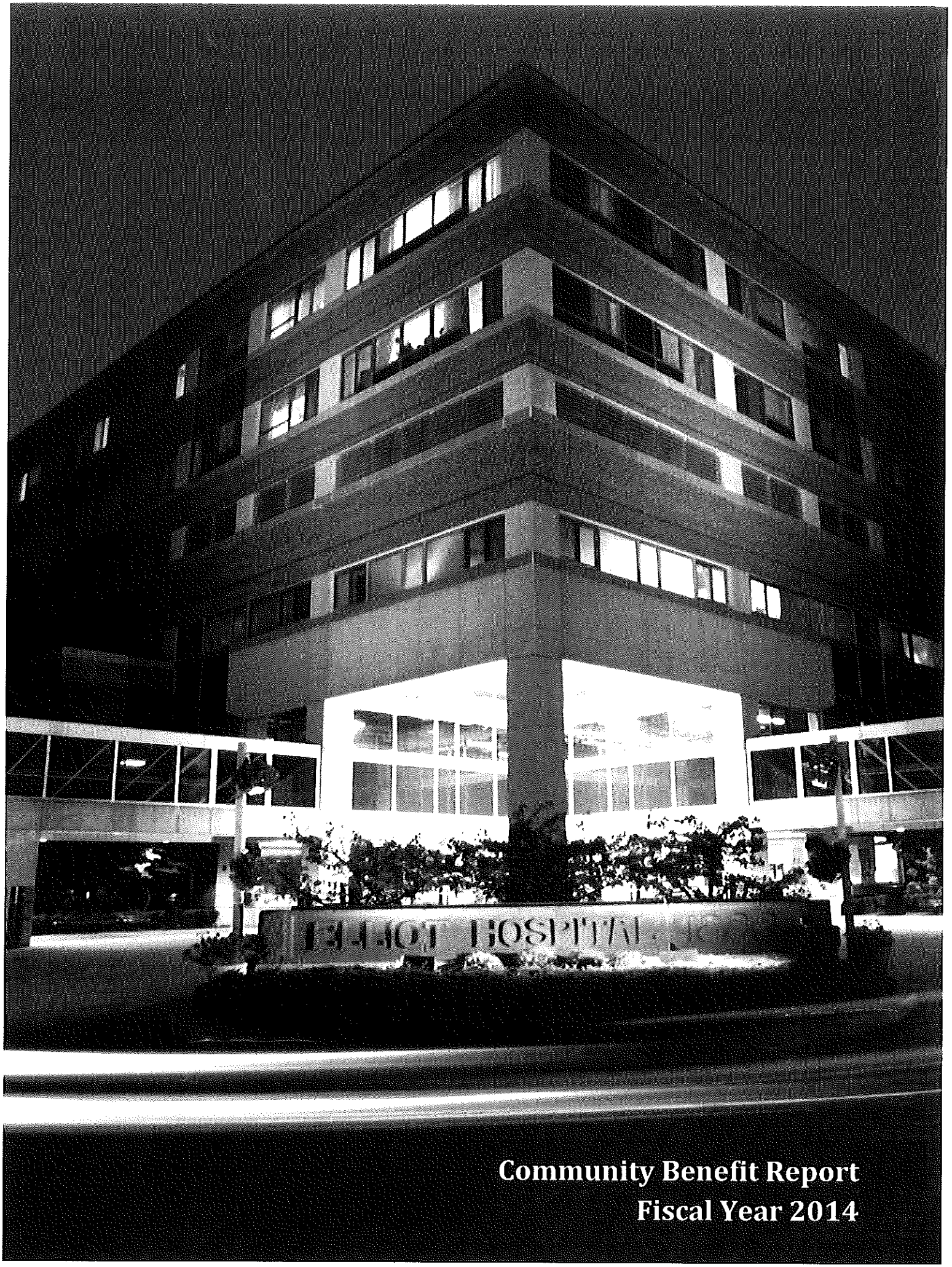

Community Benefit Report
Fiscal Year 2014

COMMUNITY BENEFITS REPORTING FORM
Pursuant to RSA 7:32-c-l

FOR FISCAL YEAR BEGINNING 07/01/2014

to be filed with:
Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Elliot Health System

Street Address 1 Elliot Way

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 14126**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
IF YES, has any of the initial filing information changed since the date of submission?
No IF YES, please attach the updated information.

Chief Executive:	Doug Dean	6036632090	swhite@elliot-hs.org
Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

Is this report being filed on behalf of more than one health care charitable trust? Yes

IF YES, please complete a copy of this page for each individual organization included in this filing.

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Pursuant to RSA 7:32-c-l

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to be filed with:
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603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Elliot Hospital

Street Address 1 Elliot Way

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 6272**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
IF YES, has any of the initial filing information changed since the date of submission?
No IF YES, please attach the updated information.

Chief Executive:	Doug Dean	6036632090	swhite@elliot-hs.org
Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

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to be filed with:
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33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Elliot Physician Network, Inc.

Street Address 1070 Holt Avenue

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 12402**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
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No IF YES, please attach the updated information.

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Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

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Pursuant to RSA 7:32-c-l

FOR FISCAL YEAR BEGINNING 07/01/2014

to be filed with:
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33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Elliot Professional Services Network, Inc.

Street Address 1070 Holt Avenue

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 11426**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
IF YES, has any of the initial filing information changed since the date of submission?
No IF YES, please attach the updated information.

Chief Executive:	Doug Dean	6036632090	swhite@elliot-hs.org
Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

Is this report being filed on behalf of more than one health care charitable trust? Yes

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COMMUNITY BENEFITS REPORTING FORM
Pursuant to RSA 7:32-c-l

FOR FISCAL YEAR BEGINNING 07/01/2014

to be filed with:
Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name VNA Home Health and Hospice Services, Inc.

Street Address 1070 Holt Avenue

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 2927**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
IF YES, has any of the initial filing information changed since the date of submission?
No IF YES, please attach the updated information.

Chief Executive:	Doug Dean	6036632090	swhite@elliot-hs.org
Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

Is this report being filed on behalf of more than one health care charitable trust? Yes

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COMMUNITY BENEFITS REPORTING FORM
Pursuant to RSA 7:32-c-1

FOR FISCAL YEAR BEGINNING 07/01/2014

to be filed with:
Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name VNA of Manchester & Southern NH, Inc.

Street Address 1070 Holt Avenue

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 2924**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
IF YES, has any of the initial filing information changed since the date of submission?
No IF YES, please attach the updated information.

Chief Executive:	Doug Dean	6036632090	swhite@elliot-hs.org
Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

Is this report being filed on behalf of more than one health care charitable trust? Yes

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COMMUNITY BENEFITS REPORTING FORM
Pursuant to RSA 7:32-c-l

FOR FISCAL YEAR BEGINNING 07/01/2014

to be filed with:
Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name VNA Personal Services, Inc.

Street Address 1070 Holt Avenue

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 2929**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
IF YES, has any of the initial filing information changed since the date of submission?
No IF YES, please attach the updated information.

Chief Executive:	Doug Dean	6036632090	swhite@elliot-hs.org
Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

Is this report being filed on behalf of more than one health care charitable trust? Yes

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Pursuant to RSA 7:32-c-l

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to be filed with:
Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Mary & John Elliot Charitable Foundation

Street Address 4 Elliot Way, Suite 301

City Manchester **County 06 - Hillsborough** **State NH** **Zip Code 3103**

Federal ID # **State Registration # 12351**

Website Address: www.elliothospital.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.
IF YES, has any of the initial filing information changed since the date of submission?
No IF YES, please attach the updated information.

Chief Executive:	Doug Dean	6036632090	swhite@elliot-hs.org
Board Chair:	Dianne Mercier	6036632090	swhite@elliot-hs.org
Community Benefits Plan Contact:	Jennifer Driscoll	6036632958	jdriscoll@elliot-hs.org

Is this report being filed on behalf of more than one health care charitable trust? Yes

IF YES, please complete a copy of this page for each individual organization included in this filing.

Elliot Health System and its Affiliates (EHS), Elliot Hospital, Elliot Physician Network, Elliot Professional Services, Mary & John Elliot Charitable Foundation and the VNA of Manchester & Southern, NH are pleased to present the FY 2014 Community Benefit Report.

Elliot Hospital – As the cornerstone of EHS, Elliot Hospital (EH) is a private, not for profit hospital established in 1890, and now a 296-bed acute care facility located in Manchester on EHS's main campus. EH is a premier health care provider in many disciplines, serving as the designated trauma center for the greater Manchester area, and designated receiving facility for psychiatric patients in the region. It is also home to New Hampshire's Hospital for Children (NHHC), the Elliot Regional Cancer Center, the Max K. Willscher Urology Center, and one of only three Level III Neonatal Intensive Care Units (NICU) in the state of New Hampshire.

Elliot Physician Network & Elliot Professional Services - EHS through the Elliot Physician Network (EPN), and Elliot Professional Services (EPS), both private, not for profit physician groups, provides primary care and specialty care via over 229 employed physicians as far north as Hooksett, east to Raymond, south to Windham and west to New Boston. The Elliot Physician Network has 25 physician practices in the Greater Manchester area.

Mary & John Elliot Charitable Foundation - The Mary & John Elliot Charitable Foundation is a not for profit, charitable organization created to provide financial support to the various needs of EHS. The Foundation is committed to building an ongoing circle of friends whose financial support will help EHS identify and meet emerging healthcare needs.

VNA of Manchester & Southern NH – As one of the region's oldest and most comprehensive not for profit home health providers, the VNA is dedicated to improving the health and well being of our community by providing compassionate, caring, and accessible healthcare. Since 1897, the VNA has helped individuals and their families face the challenges of recovering from surgery, physical disabilities, and short-term, chronic, and life-limiting illnesses.

Section 2: MISSION & COMMUNITY SERVED

Mission Statement:

> The Elliot Health System, through its subsidiary provider and development organizations, offers cost-effective strategies and solutions for meeting the region's health care challenges

Has the Mission Statement been reaffirmed in the past year (RSA:7:32e-I)? Yes

Please describe the community served by the health care charitable trust. "Community" may be defined as a geographic services area and/or a population segment.

Service Area (Identify Towns or Region describing the trust's primary service area)

> The Primary Service Area (PSA) & Secondary Service Area (SSA) jointly comprise twenty communities located in the Hillsborough, Merrimack and Rockingham counties. Communities in the PSA include: Auburn, Bedford, Candia, Chester, Deerfield, Deering, Derry, Francestown Goffstown, Hooksett, Londonderry, Manchester, New Boston, and Raymond. Communities in the SSA include Allenstown, Amherst, Dunbarton, Litchfield, Merrimack, and Weare.

Population Projections by Town & Service Area

		2010	2020	2030	2040	% Change 2010-2020	% Change 2020-2030	% Change 2030-2040
PSA	Bedford	21,203	23,967	24,859	25,067	13.0%	3.7%	0.8%
PSA	Deering	1,912	1,914	1,985	2,002	0.1%	3.7%	0.9%
PSA	Francestown	1,562	1,620	1,680	1,694	3.7%	3.7%	0.8%
PSA	Goffstown	17,651	18,084	18,757	18,915	2.5%	3.7%	0.8%
PSA	Manchester	109,565	110,163	114,263	115,221	0.5%	3.7%	0.8%
PSA	New Boston	5,321	6,502	6,744	6,800	22.2%	3.7%	0.8%
PSA	Hooksett	13,451	14,713	15,381	15,610	9.4%	4.5%	1.5%
PSA	Auburn	4,953	5,117	5,320	5,356	3.3%	4.0%	0.7%
PSA	Candia	3,909	3,799	3,950	3,977	-2.8%	4.0%	0.7%
PSA	Chester	4,768	5,717	5,944	5,984	19.9%	4.0%	0.7%
PSA	Deerfield	4,280	4,828	5,020	5,054	12.8%	4.0%	0.7%
PSA	Derry	33,109	31,189	32,429	32,649	-5.8%	4.0%	0.7%
PSA	Londonderry	24,129	24,453	25,425	25,598	1.3%	4.0%	0.7%
PSA	Raymond	10,138	10,373	10,785	10,858	2.3%	4.0%	0.7%
	PSA Total	257,961	264,459	274,572	276,825	2.5%	3.8%	0.8%
SSA	Amherst	11,201	11,448	11,874	11,973	2.2%	3.7%	0.8%
SSA	Litchfield	8,271	9,097	9,436	9,515	10.0%	3.7%	0.8%
SSA	Merrimack	25,494	25,393	26,338	26,559	-0.4%	3.7%	0.8%
SSA	Weare	8,785	9,708	10,069	10,153	10.5%	3.7%	0.8%
SSA	Allenstown	4,322	3,536	3,697	3,752	-18.2%	4.6%	1.5%
SSA	Dunbarton	2,758	3,213	3,359	3,409	16.5%	4.5%	1.5%
	SSA Total	60,831	62,395	64,773	65,361	2.6%	3.8%	0.9%
	Total PSA/SSA	318,792	326,854	339,345	342,186	2.5%	3.8%	0.8%

Service Population (Describe demographic or other characteristics if the trust primarily serves a population other than the general population): Services the General Population

Section 3: COMMUNITY NEEDS ASSESSMENT

In what year was the last community needs assessment conducted to assist in determining the activities to be included in the community benefit plan?

2013 – Copy of the Community Needs Assessment is available at:
http://elliothospital.org/website/downloads/2013CHNAFINAL7_10_13.pdf

Was the assessment conducted in conjunction with other health care charitable trusts in your community? Yes

Based on the needs assessment and community engagement process, what are the priority needs and health concerns of your community?

	NEED (Please enter code # from attached list of community needs)
1	100 – Access to Care
2	121 – Access to Dental
3	300 – Chronic Disease
4	340 – Asthma
5	370 – Mental Health – General
6	420 - Obesity
7	501 – Aging Population
8	
9	

What other important health care needs or community characteristics were considered in the development of the current community benefits plan (e.g. essential needs or services not specifically identified in the community needs assessment)?

	NEED (Please enter code # from attached list of community needs)
A	200 – Maternal & Child Health
B	400 – Lifestyle incl. Substance Abuse
C	999 – Other
D	
E	
F	
G	

Please provide additional description or comments on community needs including description of "other" needs (code 999) if applicable. *Attach additional pages if necessary:*

Section 4: COMMUNITY BENEFIT ACTIVITIES

Identify the categories of Community Benefit activities provided in the preceding year and planned for the upcoming year (note: some categories may be blank). For each area where your organization has activities, report the past and/or projected unreimbursed costs for *all* community benefit activities in that category. For each category, also indicate the *primary* community needs that are addressed by these activities by referring to the applicable number or letter from the lists on the previous page (i.e. the listed needs may relate to only a subset of the total reported costs in some categories).

A. Community Health Services	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Community Health Education	3 A 6	$63,934	$60,000
Community-based Clinical Services	3 -A- --	$84,722	$85,000
Health Care Support Services	1	$1,819	$1,800
Other:	-- -- --		
		$150,475	

B. Health Professions Education	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Provision of Clinical Settings for Undergraduate Training	1 -- --	$230,636	$240,000
Intern/Residency Education	1 -- --	$870,292	$880,000
Scholarships/Funding for Health Professions Ed	-- -- --		
Other:	1 -- -- --	$19,317	$20,000
		$1,120,245	

C. *Subsidized Health Services*	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Type of Service: Behavioral Health Services	5 -1- B	$3,136,649	$3,100,000
Type of Service: Primary Care Services	1 -- --	$3,194,418	$3,200,000
Type of Service: Pediatrics & Pediatric Specialists	1 A --	$2,977,818	$2,900,000
Type of Service: Adult Specialists	1 3 4	$3,694,853	$3,700,000
Type of Service: Maternal Fetal Medicine	1 -A- --	$388,657	$400,000
Type of Service: Other	1 C 4	$565,094	$575,000
		$13,957,489	

D. Research	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Clinical Research	C -- --	$10,576	11,000
Community Health Research	-- -- --		
Other:	-- -- --		
		$10,576	

E. Financial Contributions	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Cash Donations	1 -A- --	$316,654	$300,000
Grants	-- --		
In-Kind Assistance	1 8	$193,517	$190,000
Resource Development Assistance	-- -- --		
		$510,171	

F. Community Building Activities	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Physical Infrastructure Improvement	-- -- --		
Economic Development	-		
Support Systems Enhancement	-1- -- --	$34,468	$34,000
Environmental Improvements	-- -- --		
Leadership Development; Training for Community Members	-- -- --		
Coalition Building	-- -- --		
Community Health Advocacy	-- -- --		
		$34,468	

G. Community Benefit Operations	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Dedicated Staff Costs	C -- --	$67,477	$67,000
Community Needs/Asset Assessment	-- -- --		
Other Operations	C -- --	$158,453	$158,000
		$225,930	

H. Charity Care	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Free & Discounted Health Care Services	1 A 5	$12,486,773	$12,000,000
		$12,486,773	

L Government-Sponsored Health Care	*Community Need Addressed*	*Unreimbursed Costs (preceding year)*	*Unreimbursed Costs (projected)*
Medicare Costs exceeding reimbursement	1 6 --	$33,553,011	$34,000,000
*Medicaid Costs exceeding Reimbursement**	1 A 5	$38,865,018	$39,000,000
Other Publicly-funded health care costs exceeding reimbursement	-- -- --		
		$72,418,029	

*Medicaid
Includes NH Medicaid Enhancement Tax

Section 5: SUMMARY FINANCIAL MEASURES

	Financial Information for Most Recent Fiscal Year	*Dollar Amount*
	Gross Receipts from Operations	$964,225,664
	Net Revenue from Patient Services	$440,599,554
	Total Operating Expenses	$463,930,429
	Net Medicare Revenue	$116,868,336
1.	*Medicare Costs*	$150,421,347
	Unpaid Medicare	$33,553,011
	Net Medicaid Revenue	$27,400,345
	Medicaid Costs	$66,265,363
	Unpaid Medicaid	$38,865,018
	Unreimbursed Charity Care Expenses	$12,486,773
	Unreimbursed Expenses of Other Community Benefits	$16,009,354
2.	*Total Unreimbursed Community Benefit Expenses*	$28,496,127
	Leveraged Revenue for Community Benefit Activities	($0.00)
2.	*Total Community Benefits including Leveraged Revenue for Unreimbursed Expenses of Other Community Benefits*	$28,496,127

1. Includes Medicaid Enhancement Tax
2. Excludes unpaid Medicare & unpaid Medicaid.

OTHER NOTE:
All above financials based on Not-For-Profit affiliates only.

Section 6: COMMUNITY ENGAGEMENT in the Community Benefits Process

List the Community Organizations, Local Government Officials and other Representatives of the Public consulted in the community benefits planning process. Indicate the role of each in the process.	*Identification of Need*	*Prioritization of Need*	*Development of the Plan*	*Commented on Proposed Plan*
1) Manchester City Health Department	☒	☒	☐	☐
2) NH Department of Health & Human Services	☒	☒	☐	☐
3) Manchester Sustainable Access Project Committee	☒	☒	☐	☐
4) Manchester Senior Center	☒	☒	☐	☐
5) Manchester Rotary Club	☒	☒	☐	☐
6) The Mental Health Center of Greater Manchester	☒	☒	☐	☐
7) Catholic Medical Center	☒	☒	☐	☐
8) Elliot Hospital	☒	☒	☒	☒
9)	☐	☐	☐	☐
10)	☐	☐	☐	☐
11)	☐	☐	☐	☐
12)	☐	☐	☐	☐
13)	☐	☐	☐	☐
14)	☐	☐	☐	☐
15)	☐	☐	☐	☐
16)	☐	☐	☐	☐
17)	☐	☐	☐	☐
18)	☐	☐	☐	☐
19)	☐	☐	☐	☐
20)	☐	☐	☐	☐
21)	☐	☐	☐	☐
22)	☐	☐	☐	☐
23)	☐	☐	☐	☐
24)	☐	☐	☐	☐
25)	☐	☐	☐	☐

Please provide a description of the methods used to solicit community input on community needs (attach additional pages if necessary):

Section 7: CHARITY CARE COMPLIANCE

Please characterize the charity care policies and procedures of your organization according to the following:	**YES**	**NO**	Not Applicable
The valuation of charity does not include any bad debt, receivables or revenue	☒	☐	☐
Written charity care policy available to the public	☒	☐	☐
Any individual can apply for charity care	☒	☐	☐
Any applicant will receive a prompt decision on eligibility and amount of charity care offered	☒	☐	☐
Notices of policy in lobbies	☒	☐	☐
Notice of policy in waiting rooms	☒	☐	☐
Notice of policy in other public areas	☒	☐	☐
Notice given to recipients who are served in their home	☒	☐	☐

Needs Assessment Summary

The Manchester HSA Community Health Needs Assessment conducted by Catholic Medical Center and the Elliot Health System, with the assistance of the Manchester Health Department, was completed in June 2013. The assessment began with a review of the 2009 Community Health Needs Assessment, *Believe in a Healthy Community*.

A variety of different secondary data sources were accessed. They included the Centers for Disease Control and Prevention (CDC), New Hampshire Department of Health and Human Services, NH HealthWRQS and the City of Manchester Department of Health.

Healthy People 2020 (HP 2020) is a CDC initiative to track health behaviors and trends across the country. Part of this program is the creation of health related targets and goals that communities and states strive to meet. The Community Health Needs Assessment (CHNA) utilized as many of those targets as were available and applicable.

During March, April and May of 2013, the hospitals also conducted seven focus groups which included members of clergy, first responders, pregnant women, school nurses, Bhutanese refugees as well as two seniors groups. A group discussion was conducted on March 25, 2013 with members of the Manchester Sustainable Access Project which included the Public Health and Deputy Public Health Directors, Manchester Health Department; the President, Mental Health Center of Greater Manchester; the Chief Medical Officer, and Director, Community Health, Catholic Medical Center; Vice President of Planning and Business Development, Elliot Health System and the Medical Director, Dartmouth-Hitchcock Manchester Clinic.

During this same period of time, a survey was distributed to seniors at the Manchester Senior Center, the Rotary and the clients, patients, and staff at The Mental Health Center of Greater Manchester, with 50 responses being returned. All of this data was used to create the CHNA.