

2024 Legislative Event Report



Acknowledgements

This 2024 Upper Valley Bi-State Legislative Event continued the evolution of our advocacy relationship with the state-level policy makers in our region. I would like to thank the numerous people who provided input on what would work well and what would not work to provide our local policy makers with useful information. This includes, in no particular order, Rep. Esme Cole of Vermont, Matthew Houde of Dartmouth Health, Kate Frey and Martha McCloud of New Futures, Lori Shibinette of West Central Behavioral Health, and Dan Olson of the Vermont Public Health Association. I also want to thank the people who offered help with event logistics and planning – Andrea Smith of Dartmouth Health and All Together, and Vismaya Gopalan, PHC's Upper Valley Community Impact Fellow from Dartmouth College. Without your support and advice, this event would not have been possible. – Alice Ely

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Background

The Public Health Council's mission is to improve the health of Upper Valley residents through shared public health initiatives and services within a network of community stakeholders. Those stakeholders include people working within our robust health and social services organizations, community members and advocates, municipal leaders, and our state-level policymakers.

In 2019, we set out to build a relationship with our state-level policymakers that would introduce them to the issues of concern to our region, to each other, especially across state lines, and to the providers in our region working hard to address local needs. Recognizing that public policies can advance or inhibit our efforts to address the priority health concerns of our region, we launched a three-part plan to increase local policy action:

- Engage local policymakers on the priority health concerns of the region and how public policy affects the work we are doing with our partners.
- Provide training to our partners and members of our communities in how to advocate for public policy change.
- Link partners and members of our communities to respected organizations with a specific focus on advocacy around the issues of concern to our region.

In addition to our regular Bi-State Legislative Events, our website's <u>Advocacy</u> page provides links to advocacy training opportunities in the local area and/or available virtually. There is also a user-friendly, yet extensive list of organizations engaged in public policy work on the issues of greatest concern to our region. We encourage community members to connect with these organizations for opportunities to speak out on the issues of concern to them.

Since 2019, we have hosted four (4) Upper Valley Bi-State Legislative Events. Our original plan was to host bi-annual events but policymaker feedback encouraged us to host the events annually. At each event, we talk about health issues of greatest concern to Upper Valley residents. We tell stories and share the ways that public policy affects Upper Valley residents' access to high quality, affordable, coordinated, and consistent services. And most uniquely, we provide education and promote conversations that can increase policy coordination between New Hampshire and Vermont.

Bistate Legislative Event Agenda 2024

Monday, November 18, 2024 9:00 - 10:30 am

9:00	Wel	come i	8z I	ntrod	luctions

9:15 Overview of the Public Health Council & Our Advocacy Goals

9:30 Policy Review Discussions

- Approaches to Supporting People Experiencing Homelessness
- Protect Our Skilled Nursing Workforce
- Safe Disposal of Vaping Devices to Protect Against Harmful Substances

10:15 Next Steps

- Summary of Other Concerns Raised by Local Service Providers
- Upcoming Report of Proceedings
- Approaches to Ongoing Support

Legislative Event Notes

Purpose: To provide state-level legislators from the Upper Valley region with information, stories, and policy guidance on some of the issues impacting health and wellbeing in our region.

Overview of the Public Health Council & Our Advocacy Goals: Ms. Ely provided an overview of the PHC organization (slides provided as Appendix A).

- In summary, PHC is a:
 - Regional hub for convening and connecting organizations to improve public health.
 - Leader in facilitating new ways of approaching systemic health challenges.
 - We increase collaboration among providers for a more effective public health system, provide education on priority health concerns, and advocate for system changes.
 - We work across state lines as the people of our region live, work, and seek services across state lines daily.
 - o PHC does not lobby. Our advocacy efforts include:
 - Educate local policymakers on priority health concerns of the region and how public policy impacts our residents.
 - Provide advocacy skills training to Partners and community members.
 - Link Partners and community members to respected organizations with a focus on advocacy for the issues of concern to our region.

To plan this event, PHC surveyed its members to determine the leading public policy issues facing the health, human, and social services organizations in the region. Responses identified 17 policy related issues that could improve our ability to serve our residents. We selected three (3) issues to share at the November 18th event and will continue to explore and share information about all the issues over the next few months. An initial review of those issues are included in this report as "Public Policy Concerns of Upper Valley Stakeholders."

Approaches to Supporting People Experiencing Homelessness

Angela Zhang & Heather Griffin, LISTEN Community Services

Key Policy Recommendations:

- a. Decriminalize homelessness by removing bans on camping and sleeping in vehicles.
- b. Support the systems that reduce homelessness such as legal assistance, low barrier shelters, and low income housing development.
- c. Set policy environments conducive to recovery house development.

Discussion & Observations:

- 1. Angela Zhang emphasized that the solution to homelessness is increasing housing availability and making it more affordable.
 - a. To correct misperceptions about people experiencing homelessness, she highlighted the composition of the unhoused population:
 - i. One-third are employed.
 - ii. One-third rely on disability or retired income.
 - iii. One-third have no income at all.
- 2. Simply paying for short-term solutions is not sustainable or efficient:
 - a. Town Welfare programs, especially as required in New Hampshire, provide funding for short-term hotel stays but there is not enough funding for everyone in need.
 - b. VT Rep. Holcombe shared a striking example from Vermont: \$3 million was spent to house 17 families in a congregate shelter for 5 months. This was inefficient spending and she stressed the need for better solutions to improve wellbeing at lower costs.
- 3. Need more resources and supports to keep people from losing their housing::
 - a. Holly Gaspar summarized findings from a 3-year Medical-Legal Partnership pilot program in NH:
 - i. Housing issues like wrongful evictions and unsafe living conditions are common among low-income individuals.
 - ii. Noted an acute shortage of civil legal aid attorneys in NH, with only one for every 10,000 eligible individuals.
 - iii. Highlighted the intersection of social determinants of health (SDOH) and civil legal needs, with many low-income individuals unable to afford legal assistance.
 - b. Angela Zhang underscored the critical role of NH and VT Legal Assistance in supporting housing-insecure clients.

Summary:

- Housing and Homelessness:
 - Acknowledged the need for affordable housing as a foundational solution to homelessness.
 - Addressed inefficiencies in spending and the lack of sufficient legal aid to tackle housing-related injustices.
 - Advocated for reducing barriers to low-barrier shelters and recovery housing development.
- Substance Misuse:
 - Called for maintaining and improving systems for treatment and recovery to address one underlying cause of homelessness and well as a barrier to rehousing.

Protect Our Skilled Nursing Workforce

Alice Ely, Public Health Council of the Upper Valley

Key Policy Recommendations:

a. Waive license renewal fees for registered nurses aged 65 and older

Discussion & Observations:

- 1. Alice Ely shared that Community Nursing is a growing public health response to increasing numbers of frail older adults living in their homes longer. No matter their acute health status, many of these older adults benefit from a Community Nurse who can monitor their health status, help prevent injuries and other health problems and refer for additional support.
 - a. Many Community Nurses are retired Registered Nurses working on a part-time contract basis. The cost of renewing their RN licenses can be prohibitive. We need to remove barriers to keeping these skilled and experienced nurses in their public health roles.
 - b. Furthermore, retired or older Registered Nurses are a valuable part of the workforce, able to step up to respond to public health emergencies and filling workforce shortages
- 2. While renewal fees may not seem high to some, any amount may be a deterrent to a retiring RN who may not yet have decided to take on a new nursing role. Once an RN license has expired, reinstating the license can be very expensive and require documentation of unnecessary re-education. We have an opportunity to make returning to a nursing role in the community as easy as possible.

Summary:

By waiving Registered Nurse license renewal fees for people 65 and older, we keep these valuable skills
available in our communities.

Safe Disposal of Vaping Devices to Protect Against Harmful Substances

Andrea Smith, ALL Together, Dartmouth Hitchcock with policy research provided by Keisha Desnoyers and Vismaya Gopalan

Key Policy Recommendations:

- a. In New Hampshire, create statewide disposal options for vaping devices for schools and expand the Hazardous Waste Policy to mandate vape producer responsibility for disposal costs.
- b. In both states, provide public health funding for statewide educational campaigns regarding the dangers of vaping and create incentives for take-back programs.

Discussion & Observations:

- 1. Andrea Smith provided an overview of vaping devices, how they are used and what they contain. Vaping devices contain lithium ion batteries and harmful chemicals, including liquid nicotine and potentially others. Presentation slides are provided as Appendix B.
- 2. Schools in both states confiscate a large number of vape devices and have no safe and affordable way to dispose of them. These devices pose a fire/explosion risk and the chemical residue can be poisonous, especially to small children.
- 3. Vermont recently passed a law and beginning 7/1/2025, vaping devices must be accepted for disposal under this new HHW EPR law. Vaping device manufacturers will have to reimburse the costs associated with disposal.

Summary:

- General public is not aware that the products are hazardous.
 - Liquid nicotine is a P listed hazardous waste chemical.
 - Lithium ion batteries are a fire/explosion risk.
 - Not easily removable for devices.
 - Unaware how to properly dispose of vape devices.
- Schools, particularly, are confiscating large numbers of vape devices without a way to properly dispose of them.
 - Cost associated with disposal.

Public Policy Concerns of Upper Valley Stakeholders (2024)

To prepare for the event, we reached out to PHC Partners asking for public policy issues that were of concern. Apart from the issues discussed at the event, these are also issues PHC plans to explore, providing information and resources to policymakers.

Alcohol & Drug Misuse Prevention, Intervention, Treatment & Recovery

- Maintain/Improve Substance Misuse Treatment and Recovery Systems: Addiction Will Always Be with Us No Matter the Drug of Choice
 - a. NH: Important to Maintain Formula Allocation to Alcohol Use Prevention Fund
- 2. Safe Disposal of Vaping Devices to Protect Against Harmful Substances
 - a. Vaping devices contain both hazardous chemicals and lithium-ion batteries, which are flammable and potentially explosive. Particular concern for schools, which confiscate a large number of devices but do not have access to safe and affordable means of disposal. Policy guidance and funding could support schools but would have a broader impact of providing education to the public.
 - b. NH: Needs policy development to begin addressing issues.
 - VT: Law requiring devices be accepted as hazardous waste and requiring manufacturers to pay disposal costs.
- 3. Set Policy Environment to Encourage Recovery House Development
 - a. NH & VT: Both states would benefit from a consistent policy environment and funding support to encourage development of more recovery housing, which increases likelihood of successful recovery and protects state investments in treatment programs.
- 4. Increase Access to Inpatient Treatment Beds across the State of Vermont & Allow for Longer Length of Stay
 - a. The State of Vermont pays only for 30-day residential treatment stays which is not always consistent with assessed level of care needs. Authorizing funding for longer lengths of stay as needed would likelihood of successful recovery and protects state investments in treatment programs.

Care for Older, Frail, Adults

- 1. Empowering Local Officials to Address Elder Abuse & Neglect: Threshold of Not Meeting 7 ADLs Prevents Addressing Unsafe Living Conditions
 - a. Brought to PHC attention by local, NH-based Fire Department Officials.
 - b. Concerned that local officials are unable to access support and resources to help frail elders in their communities until the individuals have reached a threshold of not meeting 7 ADLs (Activities of Daily Living). Increases the chances of more catastrophic and costly health incidents and conditions which might be prevented with earlier intervention.
 - c. Threshold conditions in Vermont are not known at this time.

Paid Parental Leave

- Improving Paid Parental Leave Policies to Make Mandatory & Inclusive of Diverse Family Structures/Arrangements
 - a. Given increases in demand for foster care and kinship custodial arrangements for children, especially those whose parents are struggling with or have died from addiction, parental leave policies need to be broadened to ensure all custodial caregivers have equal access.

Universal School Meals

1. In New Hampshire, policy should be explored to allow for either Universal School Meals or the alternative method (Medicaid Direct Certification) of enrolling students in Free and Reduced Price Meals.

- a. As a corollary, New Hampshire policymakers may need to decouple Free and Reduced Meal Enrollment from the school aid funding formula and find an alternative method.
 - i. NH Bulletin Article, November 8,2023
- b. Vermont authorized Universal School Meals in 2023.

Addressing Homelessness

- 1. Reduce Barriers to Establishing Low Barrier Shelters for Unhoused People
 - a. The solution to homelessness is increasing housing availability and making it more affordable. There is limited funding through welfare offices to address these needs. Of the unhoused population, a third is employed, a third rely on disability or retired income, and a third have no income at all.
- 2. Decriminalizing Homelessness Due to Bans on Camping & Sleeping in Vehicles

Access to Healthcare

- 1. Increasing Access to Dental Care for Patients with Medicaid Coverage
 - a. Despite improving dental care benefits for people with Medicaid coverage, private practice dentists in New Hampshire and Vermont continue to close their practices to Medicaid patients, or strictly limit the number of patients they will see.
 - b. Safety net dental providers, such as free clinics, are unable to care for all the patients unable to find private practice dentists and waitlists are growing.
 - c. Consider options to incentivize or require dental practices to accept Medicaid patients.
- 2. Reinstate Respite Care Reimbursement for Foster Families & Caregivers of Adults with Dementia
- 3. Maintain/Improve Children's Behavioral Health Services through Funding & Workforce Initiatives

Protecting Children's Wellbeing & Healthy Development

- 1. Mandate "Unstructured and Outdoor Play" in Elementary School to Promote Healthy Brain Development
 - a. Research demonstrates that unstructured play and outdoor time both promote learning more effectively & supports mental and social wellbeing.
 - b. School staffing shortages have led to unstructured play and outdoor time being shortened or eliminated to the detriment of children's capacity to learn and remain engaged in the learning environment.
- 2. Mandate age limits on Social Media Access for Youth Under Age 14
- 3. Ban Cell Phone Use in Schools
 - a. Research supports banning cell phone use in schools to protect youth mental health and distractions from learning.
 - b. Increasing number of states are taking up legislation to ban cell phones in schools. For more information, see this KFF article from November 4, 2024.
 - c. Vermont has introduced legislation.
 - d. The New Hampshire Department of Education has issued a policy recommendation. Legislation is preferable.

Public Health & Healthcare Workforce

- 1. Waive License Renewal Fees for Registered Nurses Aged 65 and Older
 - a. Community Nursing is a growing public health response to increasing numbers of frail older adults living in their homes longer. No matter their acute health status, many of these older adults benefit from a Community Nurse who can monitor their health status, help prevent injuries and other health problems and refer for additional support.
 - i. Many Community Nurses are retired Registered Nurses working on a part-time contract basis. The cost of renewing their RN licenses can be prohibitive. We need to remove barriers to keeping these skilled and experienced nurses in their public health roles.

- b. Furthermore, retired or older Registered Nurses are a valuable part of the workforce, able to step up to respond to public health emergencies and filling workforce shortages.
 - i. By waiving license renewal fees, we keep these valuable skills available in our communities.
 - ii. Once an RN license has expired, reinstating the license can be very expensive and require documentation of unnecessary re-education.
- 2. Make Professional Health-Related Licensing Reciprocal in New Hampshire & Vermont
 - a. During the COVID pandemic, public health emergency declarations waived a number of health care professional licensing requirements, increasing reliance on reciprocity.
 - b. This experience demonstrated the effectiveness and value of having more qualified health care professionals available, especially in our border communities.
 - c. Increasing the number of health care professionals whose licenses are recognized in both New Hampshire and Vermont would benefit us in times of emergency, during workforce shortages, and as a selling point in recruiting healthcare providers to the Upper Valley.

Summary of Event Evaluation

The PHC event was well-received, with most attendees indicating in the evaluation survey that it was a valuable use of their time. Feedback highlighted that the knowledge and insights shared during the event would positively influence attendees' legislative priorities moving forward. Overall, attendees responded positively, indicating the event provided meaningful content and actionable takeaways for participants engaged in public health and policy work.

After the event, we asked attendees to rank their interest in receiving additional policy-related information about the topics raised by numerous PHC partners. While we do not have the resources to conduct extensive policy research on all of the topics, we plan to provide policy briefs on the high-priority issues and direct legislators to useful information about the lower-priority topics.

High-Priority Issues (Over 40% Interest):

- Maintain/Improve Substance Misuse Treatment and Recovery Systems: 80% thought this was an
 important issue to learn more about.
- Decriminalizing Homelessness Due to Bans on Camping & Sleeping in Vehicles: 80% thought this was an important issue to address.
- Maintain/Improve Children's Behavioral Health Services through Funding & Workforce Initiatives: 80% thought this was a critical topic to prioritize.
- Increase Access to Dental Care for Patients with Medicaid Coverage: 60% thought this issue was worth further exploration and action.

Low-Priority Issues (40% or Less Interest):

- **Set Policy Environment to Encourage Recovery House Development**: 40% thought this issue was worth addressing if resources allow.
- Empowering Local Officials to Address Elder Abuse & Neglect: Threshold of Not Meeting 7 ADLs Prevents Addressing Unsafe Living Conditions: 40% thought this issue warranted attention.
- Reduce Barriers to Establishing Low Barrier Shelters for Unhoused People: 40% thought this topic was worth exploring further.
- Mandate "Unstructured and Outdoor Play" in Elementary School to Promote Healthy Brain
 Development: 40% thought this was an important area to consider.
- Increase Access to Inpatient Treatment Beds for SUD across the State of Vermont & Allow for Longer Length of Stay: 20% thought this was an issue of interest.
- In New Hampshire, Institute Either Universal School Meals or Medicaid Direct Certification for Free/Reduced Price Meals: 20% thought this issue should be explored further.
- Reinstate Respite Care Reimbursement for Foster Families & Caregivers of Adults with Dementia: 20% thought this was a priority to address.
- Ban Cell Phone Use in Schools: 20% thought this issue deserved attention.
- Make Professional Health-Related Licensing Reciprocal in New Hampshire & Vermont: 20% thought this topic was worth considering.

Next Steps Planned

PHC appreciates the New Hampshire and Vermont policymakers who attended this November 2024 event. We hope this report will serve as a reminder of the information you received and the discussions we had together.

We will send this report to all the state-level elected officials serving the towns in our PHC region to provide them an overview of the topics we covered.

Over the next six months, we will also conduct additional research on other policy topics of interest to our local communities and relay that information to you. This information may come in the form of local policy briefs, educational information from local partners, or referrals to policy information provided by trusted, nonpartisan advocacy organizations.

We will also begin planning our next Upper Valley Bi-State Legislative Event very soon and hope to see you again in person during the fall of 2025.

Appendix A

Click image below for a link to the slideshow.



Upper Valley Bi-State Legislative Event 2024

Agenda

- Welcome & Introductions
- Overview of PHC & Our Advocacy Goals
- Policy Review Discussions
- Approaches to Supporting People Experiencing Homelessness
- Protect our Skilled Nursing Workforce
- Safe Disposal of Vaping Devices to Protect Against Harmful Substances
- Next Steps

Appendix B

Click image below for a link to the slideshow.









Safe Disposal of Vaping Devices to Protect Against Harmful Substances

Andrea Smith, ALL Together

Policy research provided by Keisha Desnoyers and Vismaya Gopalan

November 18th, 2024

Appendix C

2024 Upper Valley Bi-State Legislative Event Attendee List

LName	FName	ST	Position/Org
Almy	Susan	NH	State Representative
Cole	Esme	VT	State Representative
Drye	Margaret	NH	State Representative
Ely	Alice		Public Health Council of the Upper Valley
Gaspar	Holly		Dartmouth Health
Gopalan	Vismaya		Dartmouth Fellow, Public Health Council of the Upper Valley
Griffin	Heather		Listen Community Services
Griffin	Suellen		Board Chair Elect, Public Health Council of the Upper Valley
Holcombe	Rebecca	VT	State Representative
Masland	James	VT	State Representative
McFarlane	Donald	NH	State Representative
Ntourntourek; Peter			New Futures
Prentiss	Suzanne	NH	Senator
Smith	Andrea		Dartmouth Health, Substance Misuse Prevention
Spahr	Terry	NH	State Representative
Sullivan	Brian	NH	State Representative
Tagliavia	Michael	VT	State Representative
White	Rebecca	VT	Senator
Zhang	Angela		Listen Community Services

PHC Policy Related Resources

2023 Legislative Breakfast Event Report
2024 Recovery Housing Needs Assessment
2024 Childhood Lead Poisoning Screening Research