



Steuben County Community Health Improvement Plan

11/10/16

| Priority: Prevent Chronic Diseases | | | | | |
|--|---|---|--|--|--|
| Focus Area 1: Reduce Obesity in Children and Adults | | | | | |
| Timeframe: To be completed by December 31, 2018 (Ongoing) | | | | | |
| Do the suggested intervention(s) address a disparity? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| *Objective 1.4.1 – Working with low income population. | | | | | |
| Goal | Outcome Objectives | Interventions/Strategies /Activities | Process Measures | Partner Role | Partner Resources |
| #1.2 Prevent childhood obesity through early child care and schools. | Objective 1.2.2: By December 31, 2018, increase the number of school districts that meet or exceed NYS regulations for physical education (120 minutes per week of quality physical education in elementary grades K-6; daily physical education for children in grades K-3). <ul style="list-style-type: none"> (Baseline compliance: 5% 2008) (Data Source: Office of the New York State Comptroller) | Increase the number of schools with comprehensive and strong Local School Wellness Policies (LWPs). Assist schools in developing wellness committees. | Number of schools that adopt and implement comprehensive and strong LWPs. | Public Health (PH), Corning Hospital, St. James, Genesee Valley (GV) BOCES, Cornell Cooperative Extension (CCE) working with school districts on LWPs. | CCE: \$1,262.10 PH: \$2,700 Corning Hospital: \$1,200 St. James: \$1,080 GV BOCES: In kind |
| #1.3 Expand the role of health care, health services providers and insurers in obesity prevention. | Objective 1.3.2: Increase the percentage of infants born in NYS hospitals who are exclusively breastfed during the birth hospitalization by 10% from 43.7% (2010) to 48.1%. | Recruit hospitals to participate in quality improvement efforts to increase breastfeeding exclusivity at discharge. | Number of efforts, practice/policy/procedure updates, trainings, etc. implemented by birthing hospitals. | Corning Hospital to participate in/ expand efforts to increase breastfeeding exclusivity at discharge. Efforts include: <ul style="list-style-type: none"> Development of standard work to educate all LDRP patients on the importance of breastfeeding (to include education to “bottle” moms re: | Corning Hospital: \$2,000 / Train 6-8 FTE’s FLBP/S2AY RHN: \$3,300 PH: \$1,760 |





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| | <p>Data Source: Bureau of Biometrics and Biostatistics, NYSDOH; NYC Office of Vital Records, NYC DOHMH) (Also, see: Focus Area – Maternal and Infant Health)</p> | | | <p>benefits of breastfeeding).</p> <ul style="list-style-type: none"> • Change physician order sets to include Lanolin for breast feeding moms and educate on its use. • Upon admission to the hospital, identify if they have received their breast pump; if not, ensure arrangements are made prior to patient discharge. • Commitment to have all RN’s within the LDRP unit to receive training on providing lactation support (currently around 50% of staff are trained). • Develop visual education materials for patient rooms <p>Finger Lakes Breastfeeding Partnership (FLBP) and S2AY Rural Health Network (RHN) to assist hospital in increasing breastfeeding exclusivity at discharge through procurement of grants, offering trainings, networking, etc. PH serves as a member of the FLBP.</p> | |
| | | <p>Encourage and recruit pediatricians, obstetricians and gynecologists, and other primary care provider practices and clinical offices to become New York State Breastfeeding Friendly Practices.</p> <p>Encourage daycare centers/homes</p> | <p>Number of primary care practices that are designated as NYS Breastfeeding Friendly. & Number and demographics of women reached by policies and practices to</p> | <p>PH, FLBP, S2AY RHN, Corning Hospital, and Arnot Health to assist practices with achieving NYS Breastfeeding Friendly designation.</p> <p>Specific efforts of Corning Hospital include:</p> <ul style="list-style-type: none"> • Meet with lactation consultant at Guthrie Medical OB/GYN practice to develop a plan to collaborate and support the practice (in order to encourage pre-natal and post-partum education). • Partner with Guthrie Pediatrics and | <p>PH: \$845</p> <p>FLBP / S2AY RHN: \$3,300</p> <p>Corning Hospital: \$1,000</p> <p>Arnot Health: 40 hours</p> <p>St. James: \$300</p> |





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| | | <p>participating in the CACFP to become Breastfeeding Friendly Certified through the NYSDOH.</p> | <p>support breastfeeding.</p> <p>Number of daycare centers/homes to become NYS Breastfeeding Friendly Certified.</p> | <p>OB/GYN practices to develop a Breastfeeding Friendly Policy.</p> <ul style="list-style-type: none"> As part of the planning for the new Medical Office Building (MOB) project, include lactation space. Assist in the development of visual education materials for patient rooms (Guthrie Pediatrics and OB/GYN) <p>St. James to encourage practices and daycare centers/homes in becoming Breastfeeding Friendly Certified. Efforts include sending letters and referring interested providers to the FLBP and/or ProAction/Child Care Aware for information and assistance.</p> <p>Child Care Aware to assist daycare centers/homes in becoming NYS Breastfeeding Friendly Certified.</p> | <p>ProAction / Child Care Aware: \$1484</p> |
| <p>#1.4 Expand the role of public and private employers in obesity prevention.</p> | <p>Objective 1.4.1: By December 31, 2018, increase by 10% the percentage of small to medium worksites that offer a comprehensive worksite wellness program for all employees and that is fully accessible to people with disabilities. Baseline to be determined.) (Data Source: NYSDOH Healthy Heart Program Worksite Survey)</p> | <p>Implement nutrition and beverage standards in public institutions, worksites, and other key locations such as hospitals.</p> | <p>Number and type of key community locations that adopt and or implement nutrition and beverage standards. & Number of adults that have access to key community locations that adopt and or implement</p> | <p>PH, Steuben Rural Health Network (SRHN), and Cancer Services Program (CSP) to reach out to worksites to promote the implementation of healthy policies/worksite wellness programs.</p> <p>GV BOCES and Arnot Health to work with worksites through the Creating Healthy Schools and Communities Grant.</p> <p>Corning Hospital, Arnot Health, and St. James to work internally to implement healthy policies.</p> <p>CCE to assist in worksite wellness efforts through education, programming, help set</p> | <p>PH: \$11,000</p> <p>GV BOCES: In kind</p> <p>Arnot Health: 50 hours</p> <p>Corning Hospital: \$750</p> <p>SRHN: \$4,800</p> <p>CSP / St. James: \$9,040</p> |





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| | | | nutrition and beverage standards. | standards, etc. S2AY RHN/Regional Worksite Wellness Committee to assist PH and partners in worksite wellness efforts. | CCE: \$1,584.22 Regional Worksite Wellness Committee / S2AY RHN: \$2,475 |
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| Priority: Prevent Chronic Diseases | | | | | |
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| Focus Area 2: Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure | | | | | |
| Timeframe: To be completed by December 31, 2018 (Ongoing) | | | | | |
| Do the suggested intervention address a disparity? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| *Objective 2.1.3 and Objective 2.3.2 – Targeting low income population and low income housing. | | | | | |
| Goal | Outcome Objectives | Interventions/Strategies /Activities | Process Measures | Partner Role | Partner Resources |
| #2.1 Prevent initiation of tobacco use by youth and young adults, especially among low socioeconomic status (SES) populations. | Objective 2.1.3: By December 31, 2018, increase the number of municipalities that restrict tobacco marketing (limiting the density of tobacco vendors and their proximity to schools) from zero (2011) to 10. (Data Source: Community Activity Tracking, CAT) | Create a local environment that successfully demands passage of one or more of the following local laws or regulations that: a. Restricts the number, location, and/or type of retailers that sell tobacco products within a municipality jurisdiction b. Restricts the redemption of coupons or use of multi-pack discounts from licensed tobacco retailers | Decrease in density of tobacco vendors. | Southern Tier Tobacco Awareness Coalition (STTAC) to work toward objective through education, promotion, public hearings, trainings, etc. PH to advocate for county legislation to increase purchasing age to 21 and supporting STTAC in their efforts. Arnot Health will participate in STTAC meetings and advocacy activities. Arnot Health will provide community presentations to youth to prevent the initiation of tobacco use. | STTAC: \$86,000 PH: \$3,040 Arnot Health: 70 hours |
| #2.3 Eliminate | Objective 2.3.2: | Encourage adoption of | Number of units | STTAC to work with local housing authorities, | STTAC: \$32,000 |





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| exposure to secondhand smoke. | By December 31, 2018, increase the number of local housing authorities that adopt a tobacco-free policy for all housing units from 3 (2012) to 12. (Data source: Community Activity Tracking, CAT) | smoke-free policies in publicly and privately operated housing. | covered by smoke free multi-unit dwelling policies. | landlords, etc. to implement smoke-free policies. Arnot Health will provide community presentations to increase awareness of the harm of secondhand smoke. | Arnot Health: 20 hours |
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Priority: Prevent Chronic Diseases

Focus Area 3: Increase Access to High Quality Chronic Disease Preventative Care and Management in Both Clinical and Community Settings.

Timeframe: To be completed by December 31, 2018 (Ongoing)

Do the suggested intervention address a disparity? Yes No

| Goal | Outcome Objectives | Interventions/Strategies/Activities | Process Measures | Partner Role | Partner Resources |
|--|---|--|---|--|--|
| #3.2: Promote use of evidence-based care to manage chronic diseases. | Objective 3.2.4: By December 31, 2018, increase the percentage of health plan members, ages 18-85 years, with hypertension who have controlled their blood pressure (below 140/90 | Participation in regional blood pressure registry. | Number of primary care practices that submit patient numbers to registry. | <p>Finger Lakes Health Systems Agency (FLHSA) to provide technical support, compile data/reports, and recruit additional practices.</p> <p>PH to follow up with participating providers to offer education, training, etc. to increase control rates. Assist with recruiting additional practices.</p> <p>Corning Hospital and Arnot Health to provide data to FLHSA for registry. Assist with recruiting additional practices.</p> <p>S2AY RHN to provide support to PH in reaching out to practices, promoting programs, and offering trainings.</p> | <p>FLHSA: In kind PH: \$1,750</p> <p>Corning Hospital: \$500</p> <p>Arnot Health : 24 hours</p> <p>S2AY RHN: \$2,475</p> |





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| <p>#3.3 Promote culturally relevant chronic disease self-management education.</p> | <p>Objective 3.3.1: Increase by at least 5% the percentage of adults with arthritis, asthma, cardiovascular disease, or diabetes who have taken a course or class to learn how to manage their condition.</p> | <p>Promote the use of evidence-based interventions to prevent or manage chronic diseases.</p> | <p>Percent of adults with one or more chronic diseases who have attended a self-management program.</p> <p>Number of providers that use their EHRs to trigger them to speak to their patients about their weight, diet and exercise, and refer them to EBIs.</p> | <p>PH to offer National Diabetes Prevention Program (NDPP) classes. Promote and enroll members in classes.</p> <p>Identify additional partners that can be trained in Chronic Disease Self-Management Program (CDSMP) and hold classes within the county. SRHN and Arnot to offer CDSMP.</p> <p>St. James to have peer leaders trained to offer CDSMP in Hornell. Will offer space and media promotion.</p> <p>Corning, St. James, and Arnot Health to refer into the programs.</p> <p>S2AY RHN / Regional Living Healthy Group to assist with coordination of evidence based programs and provide back-up peer leaders for classes.</p> | <p>PH: \$12,000</p> <p>SRHN: \$22,293</p> <p>Arnot Health: 120 hours</p> <p>St. James: \$1,600</p> <p>S2AY RHN / Regional Living Healthy Group: \$1,886</p> |
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Priority: Promote Healthy Women, Infants, and Children
Focus Area 1: Maternal and Infant Health

Timeframe: To be completed by December 31, 2018 (Ongoing)

Do the suggested intervention address a disparity? Yes No

*Objective 1-1 – Working with low income population (Medicaid).

| Goal | Outcome Objectives | Interventions/Strategies /Activities | Process Measures | Partner Role | Partner Resources |
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| #1.1 Reduce Premature Birth | <p>Objective 1.1: By December 31, 2018, reduce the rate of preterm birth in NYS by at least 12% to 10.2%. (This target for 2018 is in alignment with the national</p> | <p>Provide evidence based home visiting and community health worker program models to provide enhanced support to assist women in getting health</p> | <p>Number and percent of women who received evidence based home visits.</p> | <p>PH to conduct Community Health Worker program and screenings for other Home Visiting programs.</p> <p>Corning Hospital, Arnot Health, and St. James Mercy Hospital to assist with promotion and referring patients.</p> | <p>Public Health: 3.5 FTEs</p> <p>Corning Hospital: \$500</p> <p>St. James: \$300</p> |





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| | ASTHO/March of Dimes target of 17.9% improvement by 2020 to achieve a national preterm birth rate of 9.6 %.) | insurance, engaging in health care services, securing basic needs assistance, and practicing healthy behaviors. | | | Arnot Health: 24 hours |
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