



**Department
of Health**

Community Health Improvement Planning 2016-2018 Summary

May 12, 2017

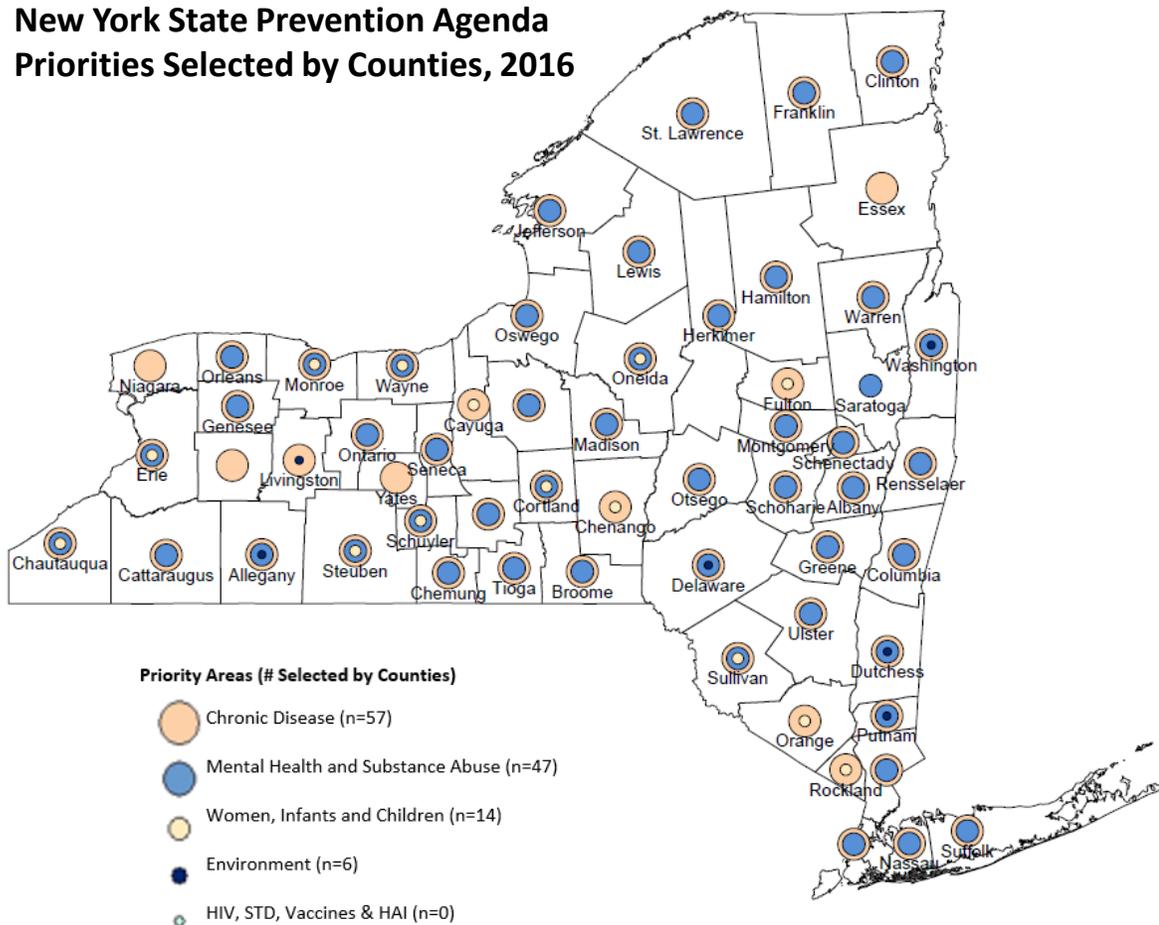
Office of Public Health Practice

2016-2018 Local Community Health Improvement Planning Cycle

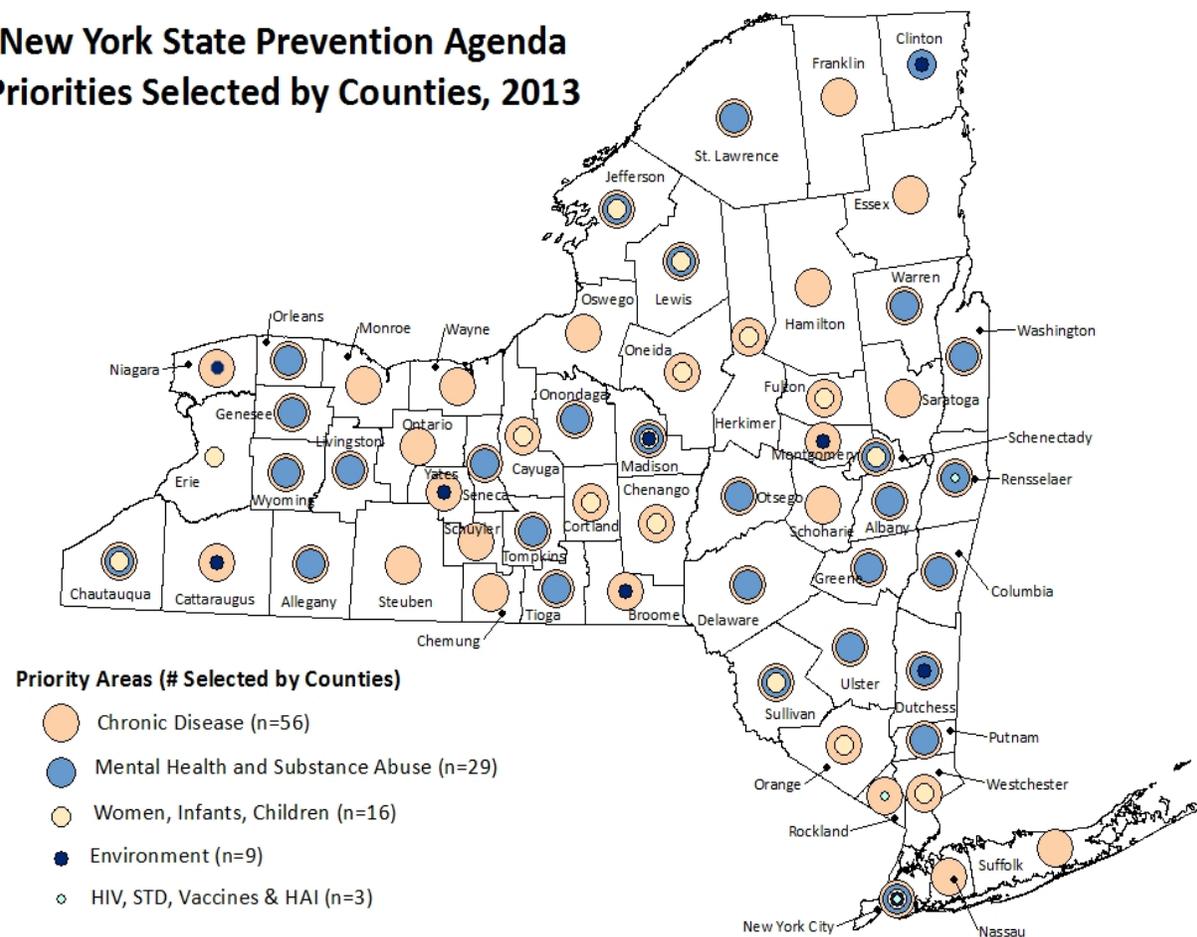
Guidance called for collaboration:

- Work with partners to identify common public health priorities
- Consider developing a single plan that serves as both the LHD's community health improvement plan (CHIP) and the hospital's community service plan (CSP)
- Describe process of how community was engaged to identify and select at least two "collaborative" health priorities aligned with the Prevention Agenda
- Outline how LHDs and hospitals are working with partners to address shared priorities, ensuring that at least one priority addresses a disparity

New York State Prevention Agenda Priorities Selected by Counties, 2016

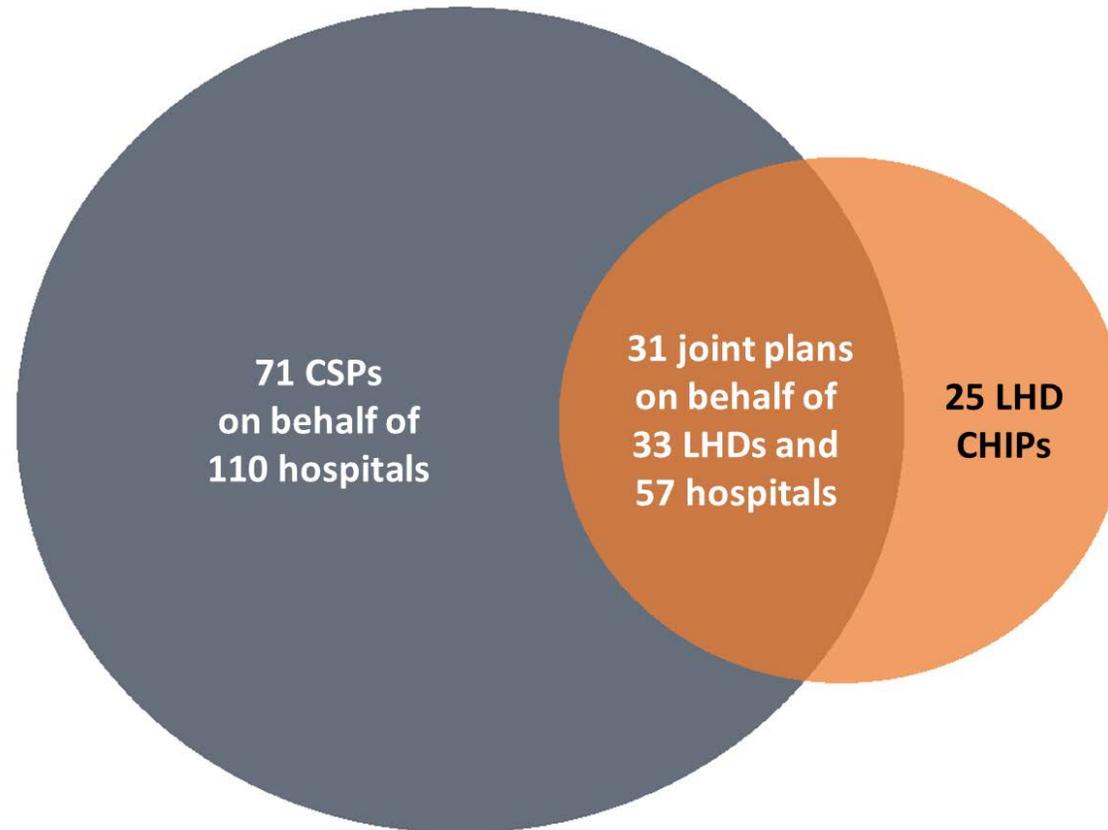


New York State Prevention Agenda Priorities Selected by Counties, 2013

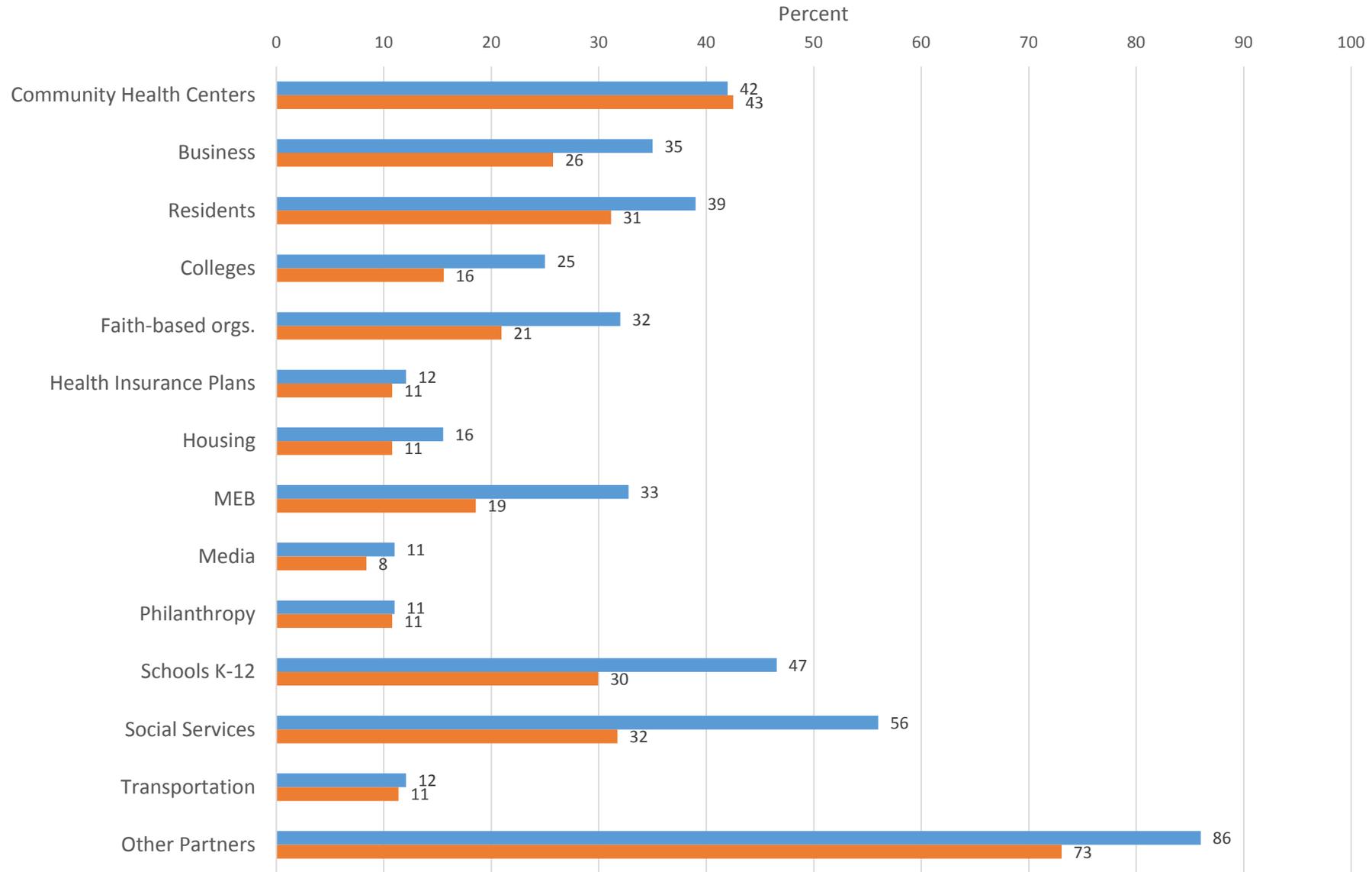


2016-2018 Community Health Improvement Plans Received

127 plans by 58 LHDs and 167 Hospitals



Prevent Chronic Diseases: Partners Engaged, December 2016

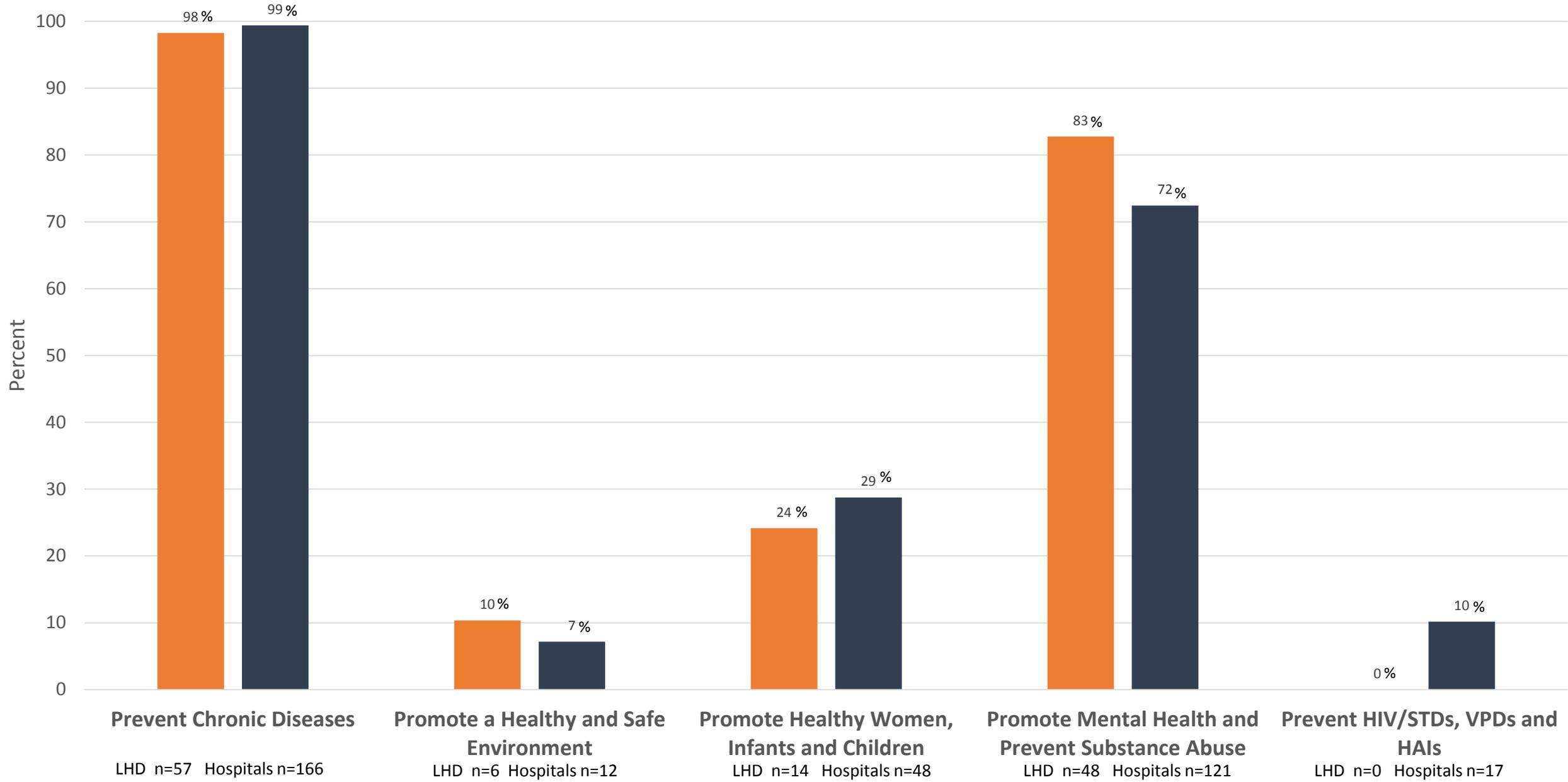


TOTALS: LHD n=57 Hospitals n=166

NOTE: Organizations often indicated working in more than one priority area

■ LHD ■ Hospitals

Priority areas chosen by local health departments and hospitals, December 2016

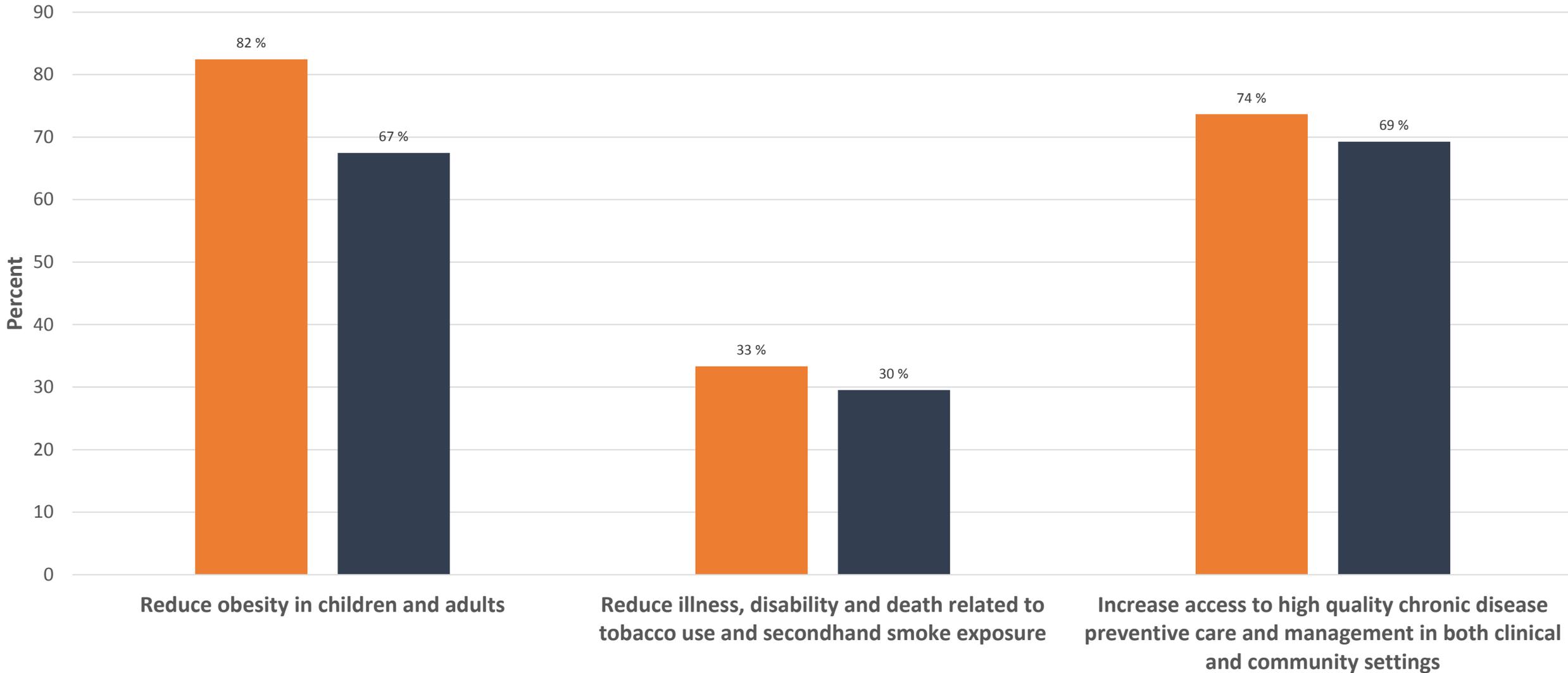


TOTALS: LHD n=58 Hospitals n=167

NOTE: Organizations often indicated working in more than one priority area

■ LHD ■ Hospitals

Preventing Chronic Disease focus areas among local health departments and hospitals, December 2016

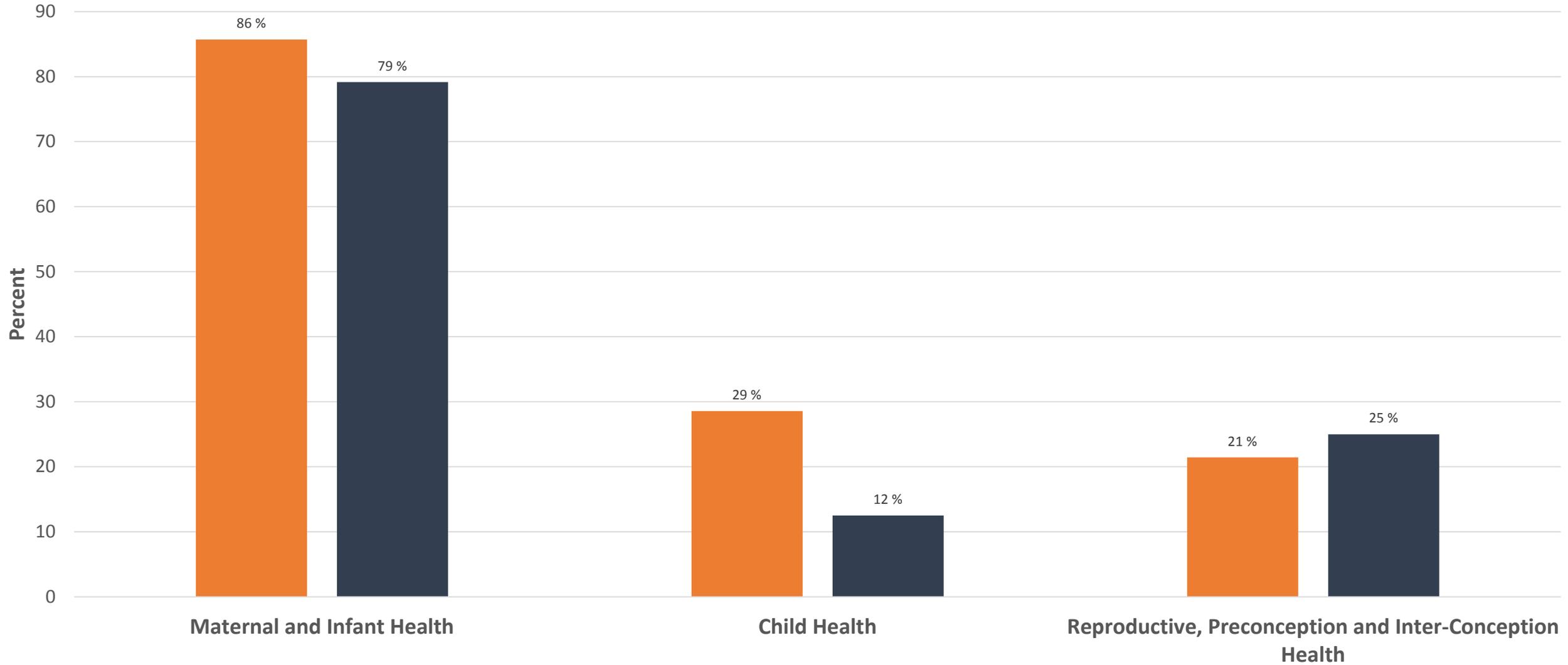


LHD n=57 Hospitals n=166

LHD Hospitals

NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

Promote Healthy Women, Infants, and Children focus areas among local health departments and hospitals, December 2016

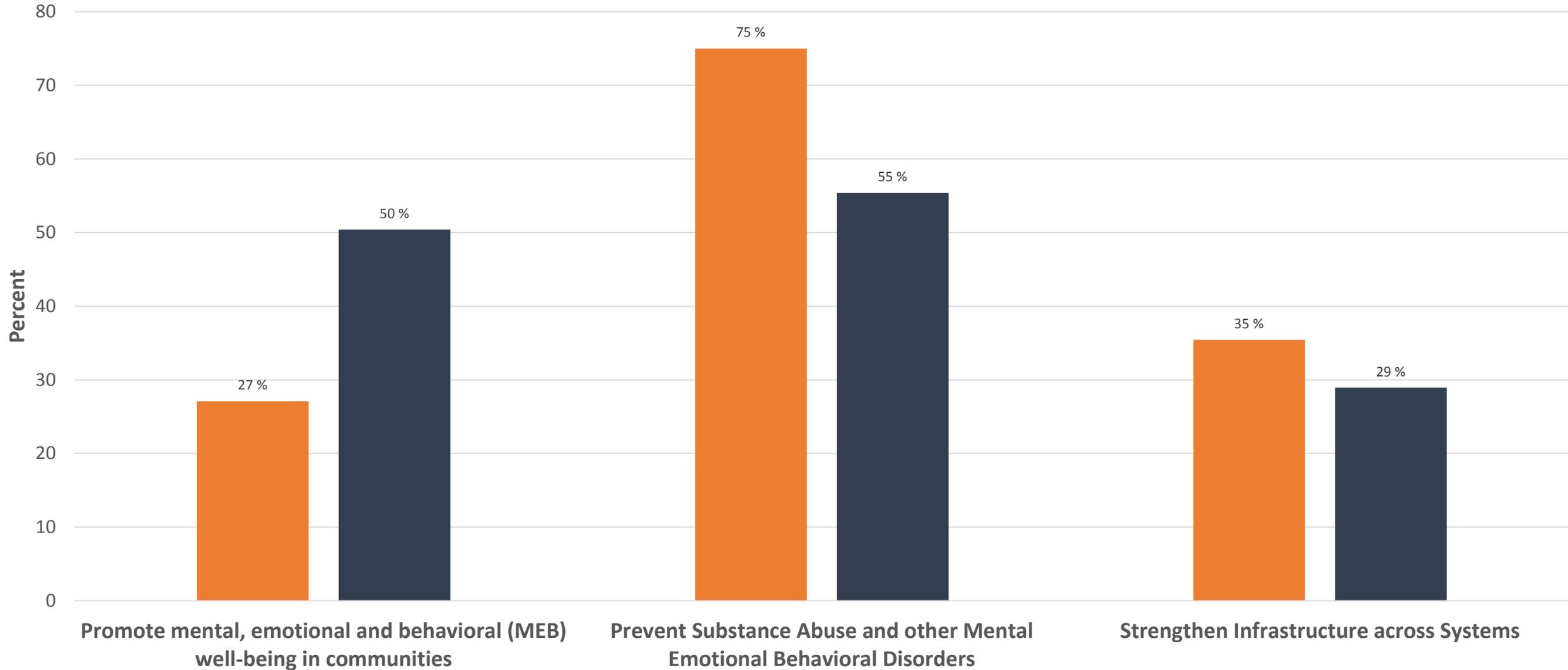


LHD n=14 Hospitals n=48

LHD Hospitals

NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

Promote Mental Health and Prevent Substance Abuse focus areas among local health departments and hospitals, December 2016

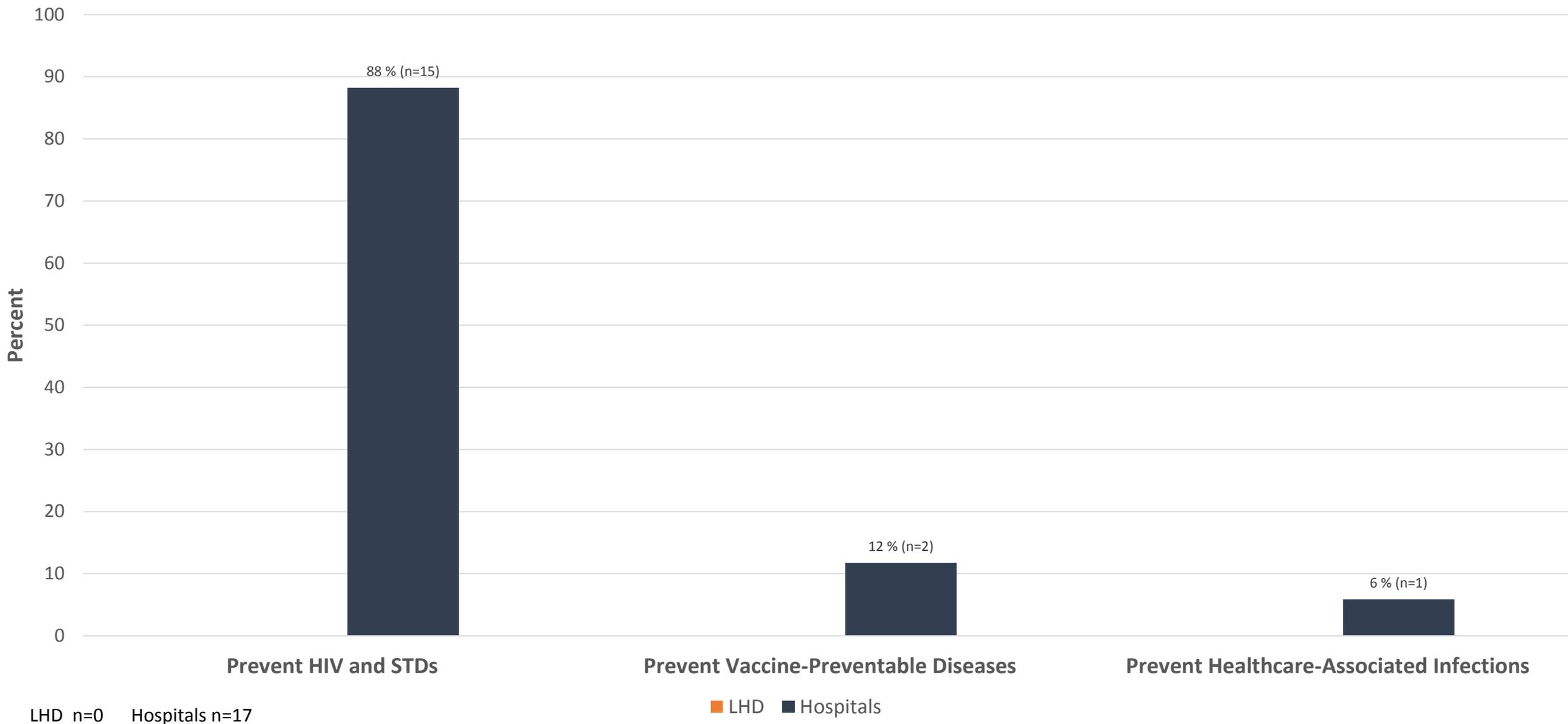


LHD n=48 Hospitals n=121

LHD Hospitals

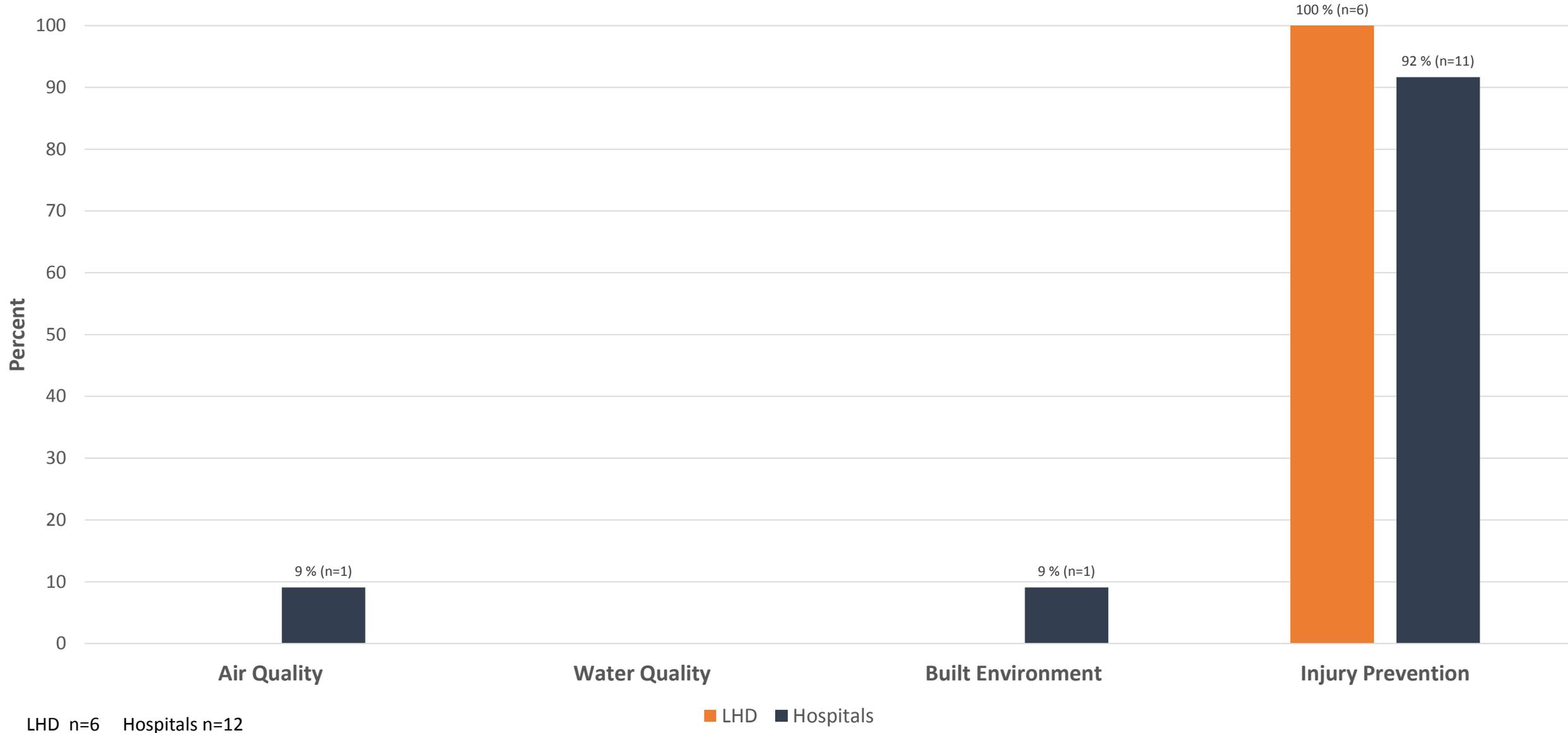
NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

Prevent HIV/STDs, Vaccine-Preventable Diseases and Healthcare-Associated Infections focus areas among local health departments and hospitals, December 2016



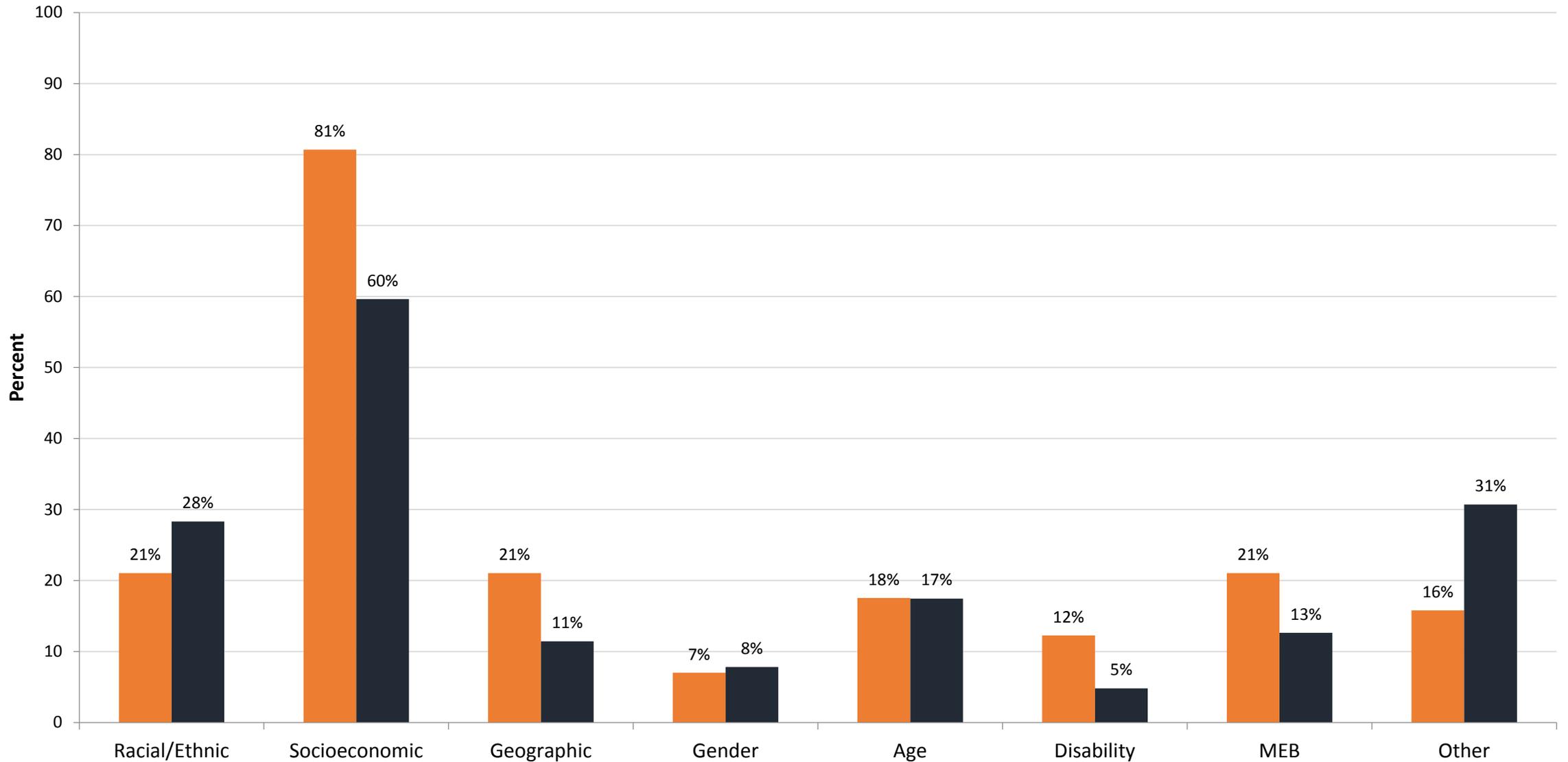
NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

Promote a Healthy and Safe Environment focus areas among local health departments and hospitals, December 2016



NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

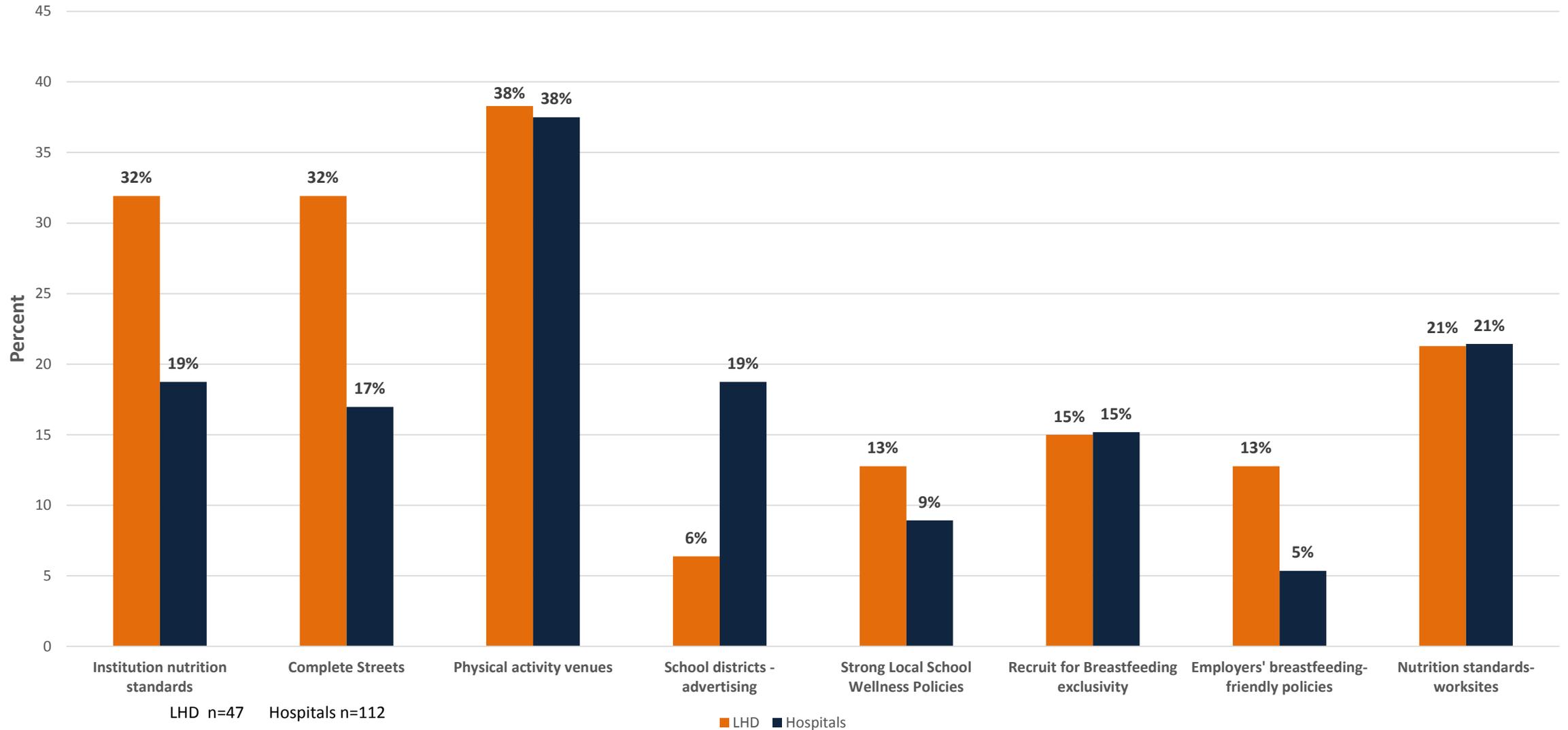
Disparities addressed in Prevent Chronic Diseases, December 2016



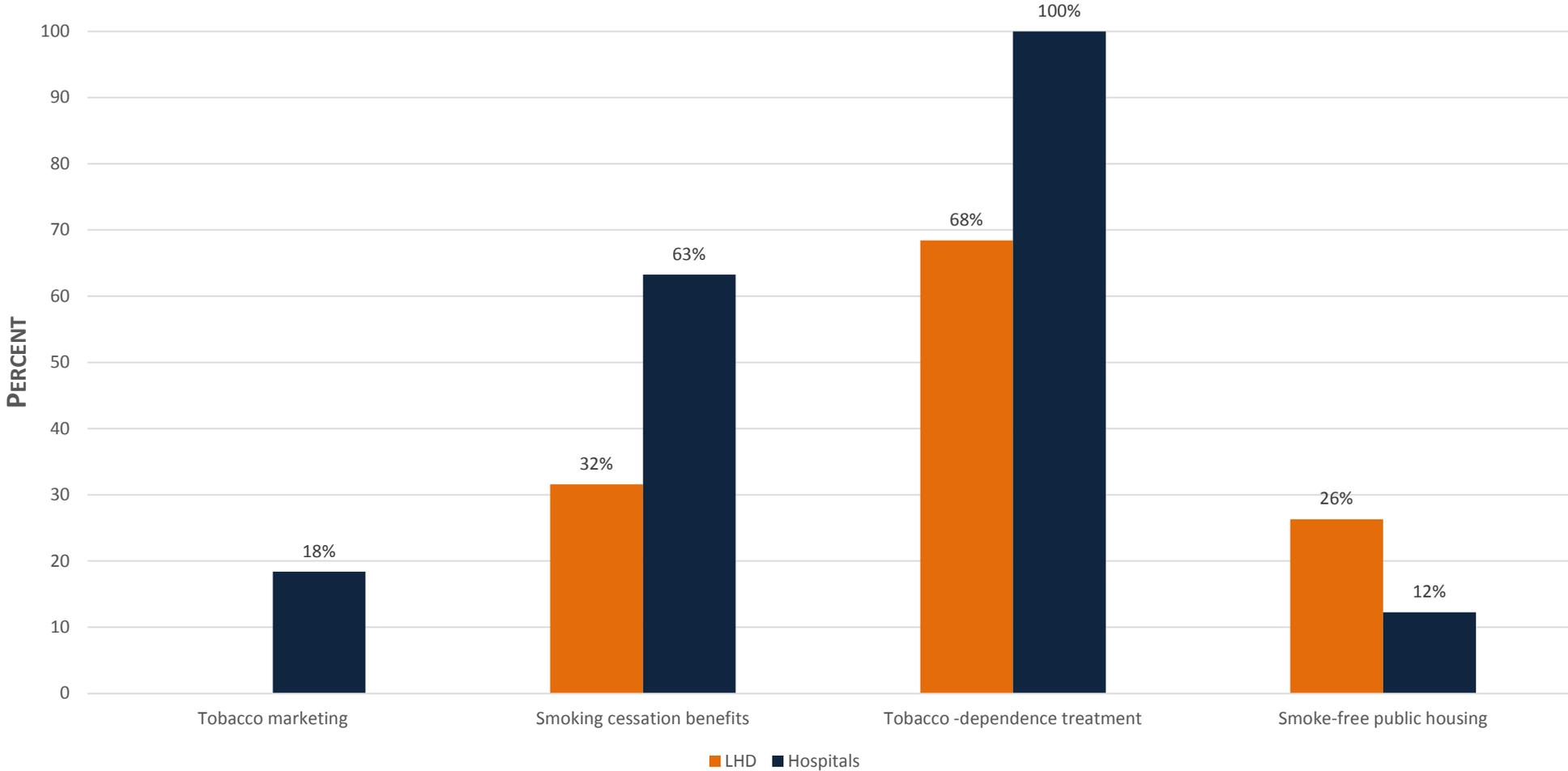
LHD n=57 Hospitals n=166

■ LHD ■ Hospitals

Interventions - Reducing Obesity, Prevent Chronic Diseases, December 2016

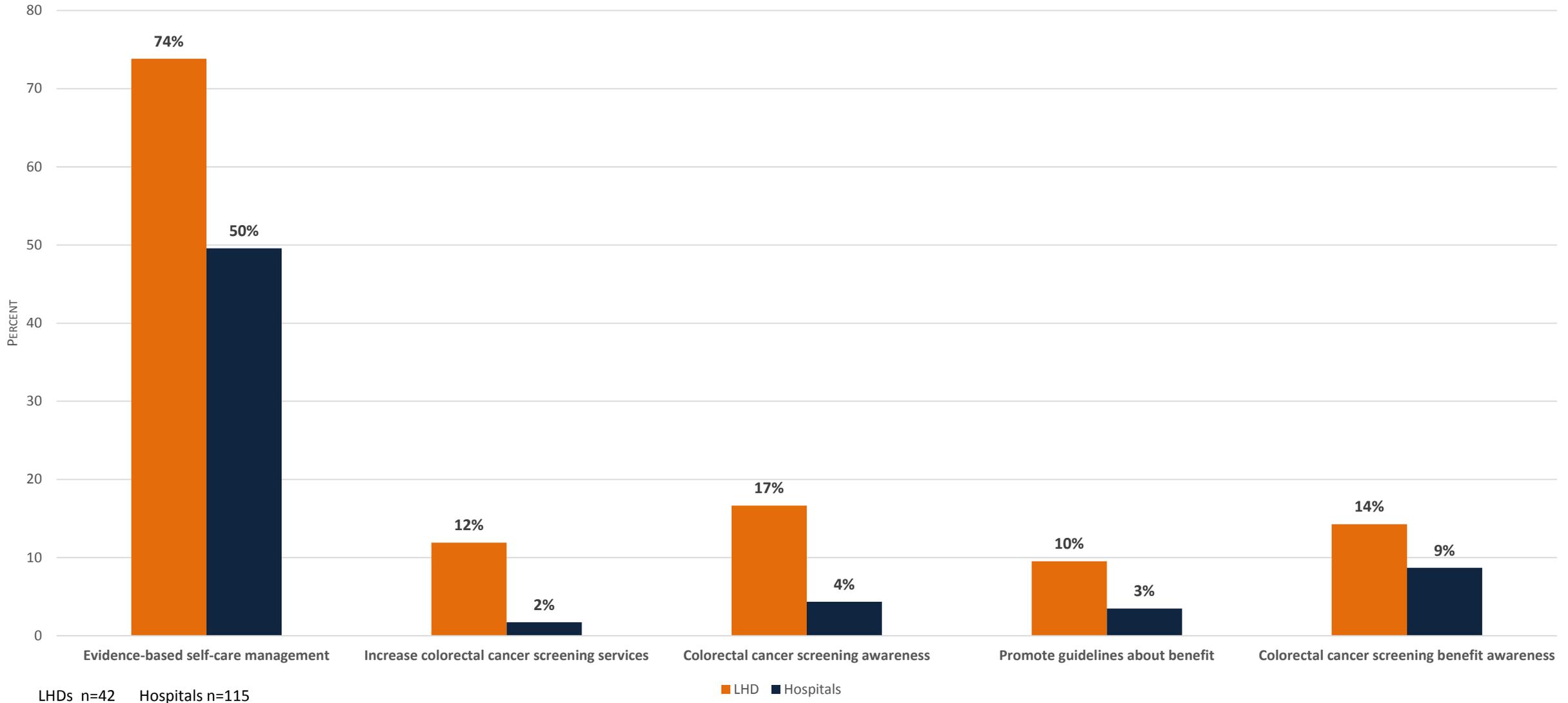


Interventions - Reducing tobacco use, Prevent Chronic Diseases, December 2016

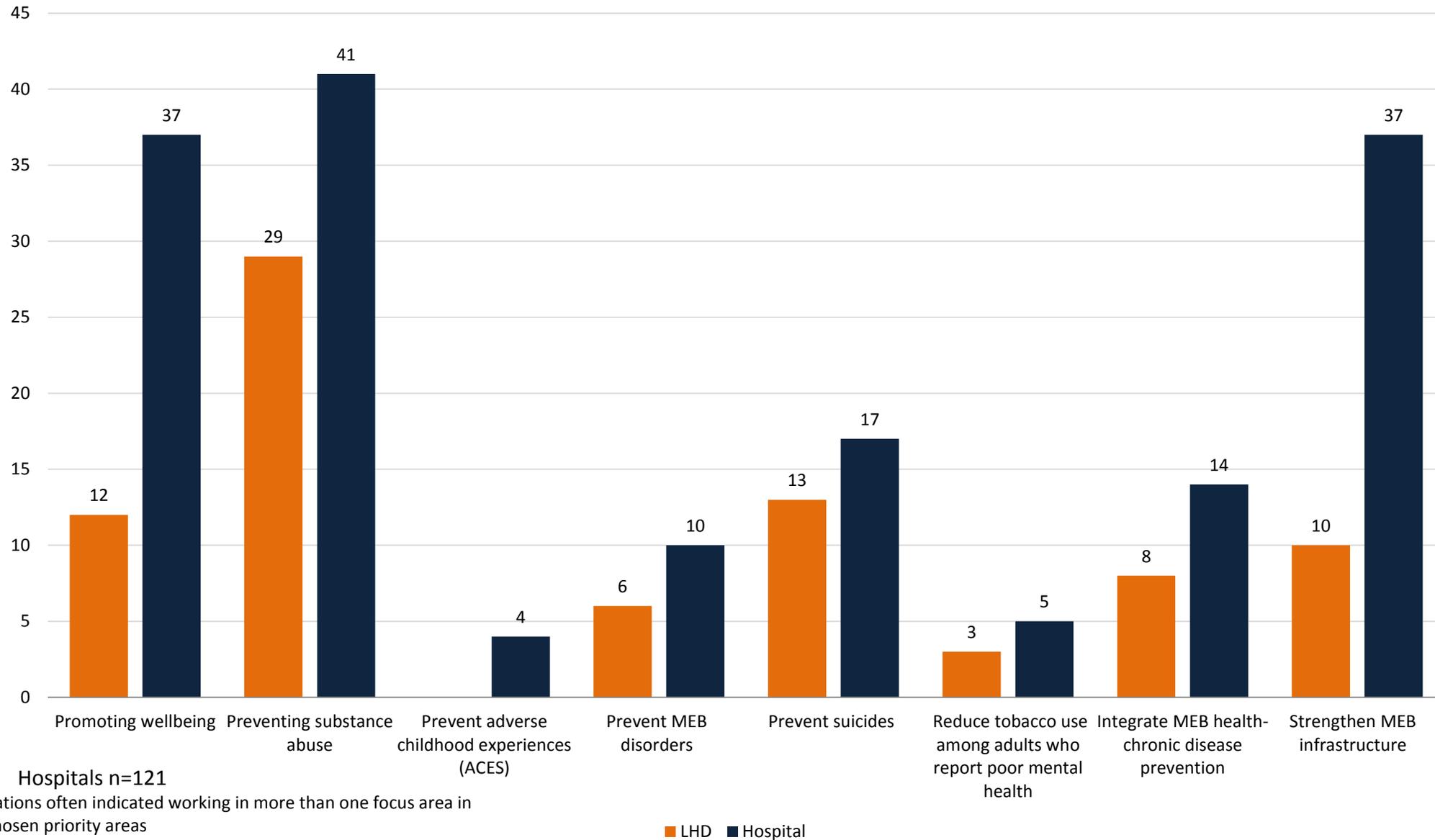


LHD n=19 Hospitals n=49

Intervention - Evidence-based Preventive Care, Prevent Chronic Diseases, December 2016

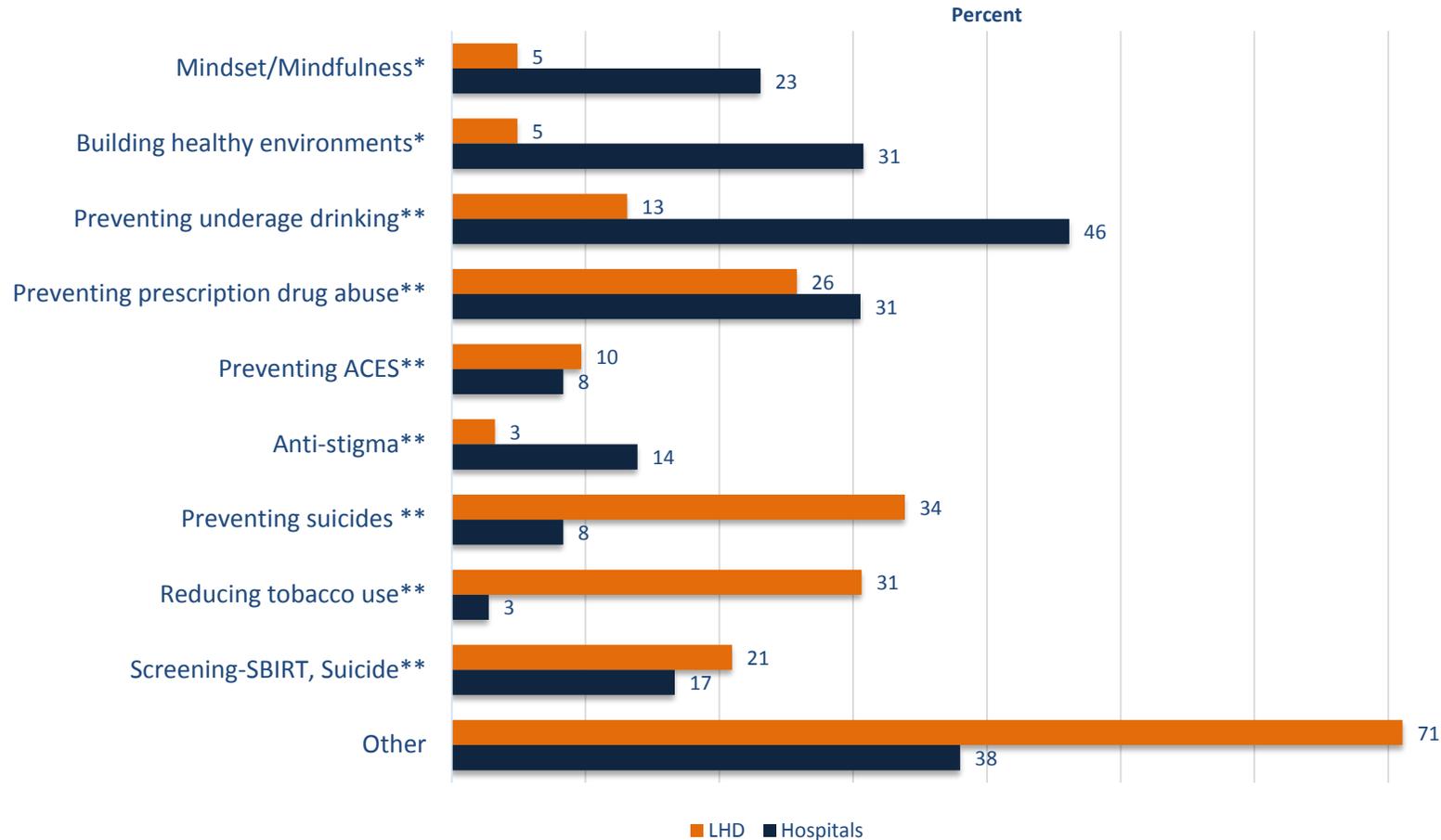


Promote Mental Health Prevent Substance Abuse Goals, December 2016



MEB = Mental Emotional Behavioral Health

Interventions-Promote Mental Health Prevent Substance Abuse, December 2016

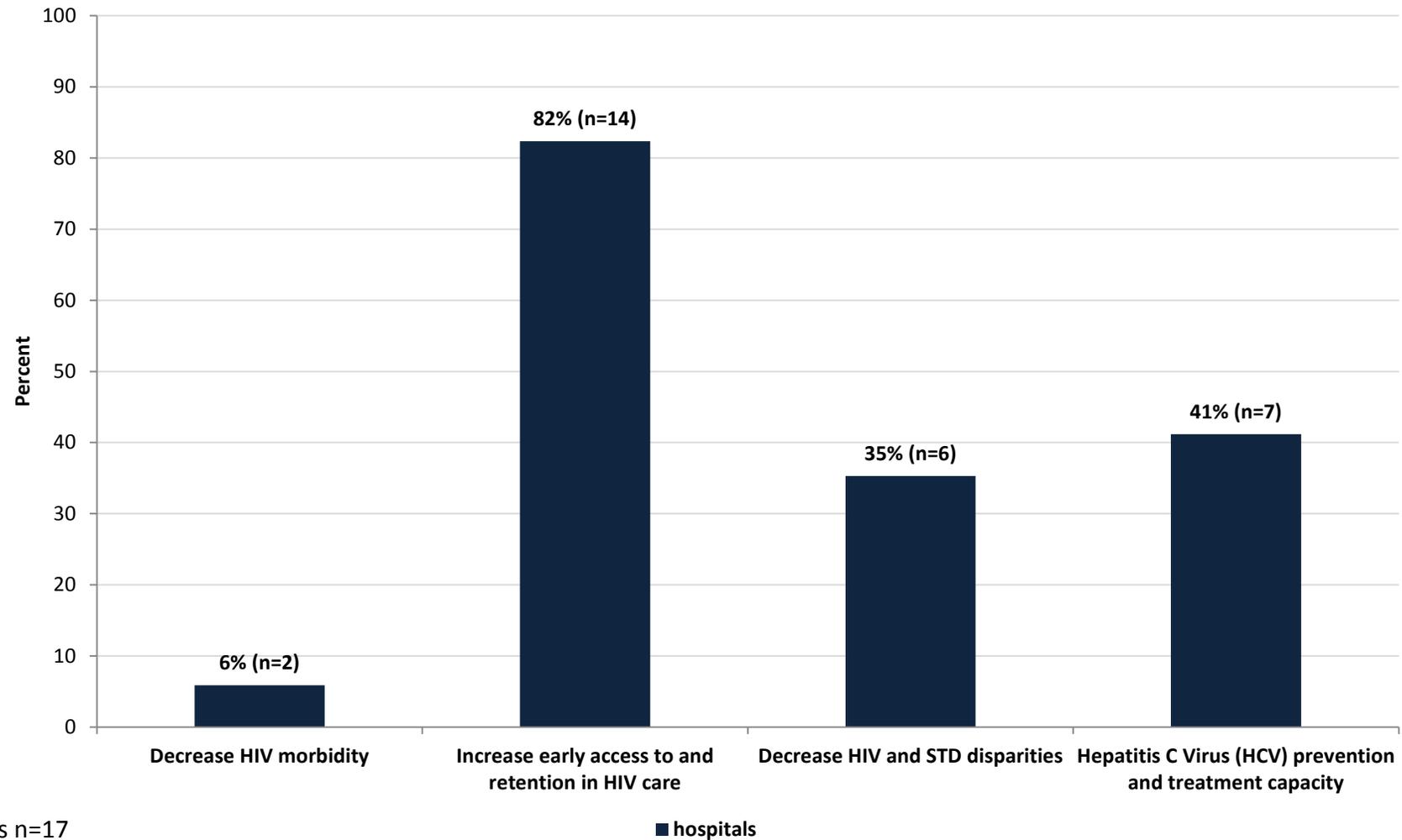


Focus Area 1*: LHD n=13 Hospitals n=61
 Focus Area 2***: LHD n=36 Hospitals n=67
 Other: LHD n=48 Hospitals 121

Other:

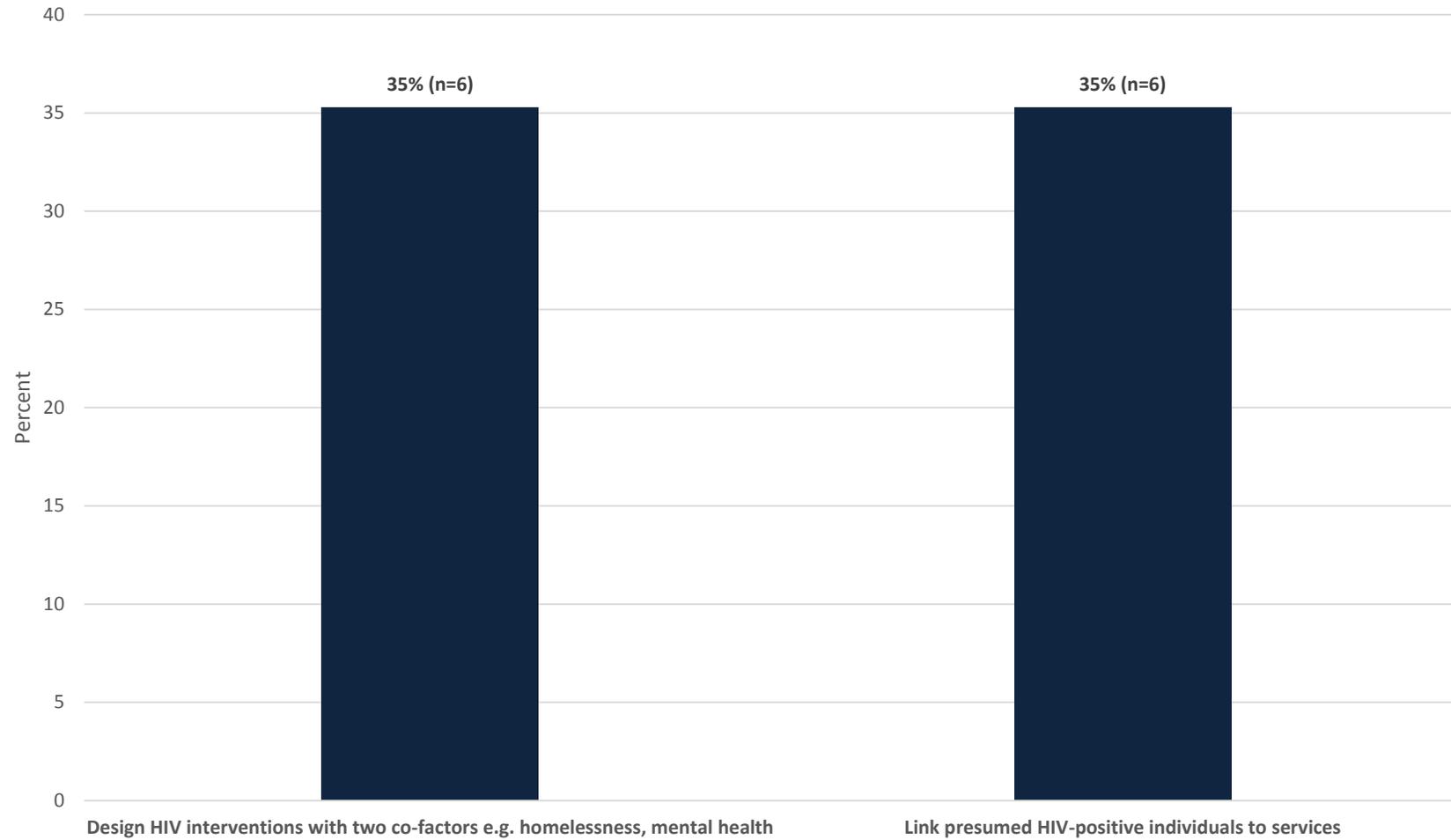
- Overdose prevention, Naloxone training
- Diversion (take back drug)
- Supporting Opioid Task Force
- Mental Health First Aid
- Systems of Care

Prevent HIV/STDs, Vaccine Preventable Diseases and Healthcare Associated Infections goals, December 2016



NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

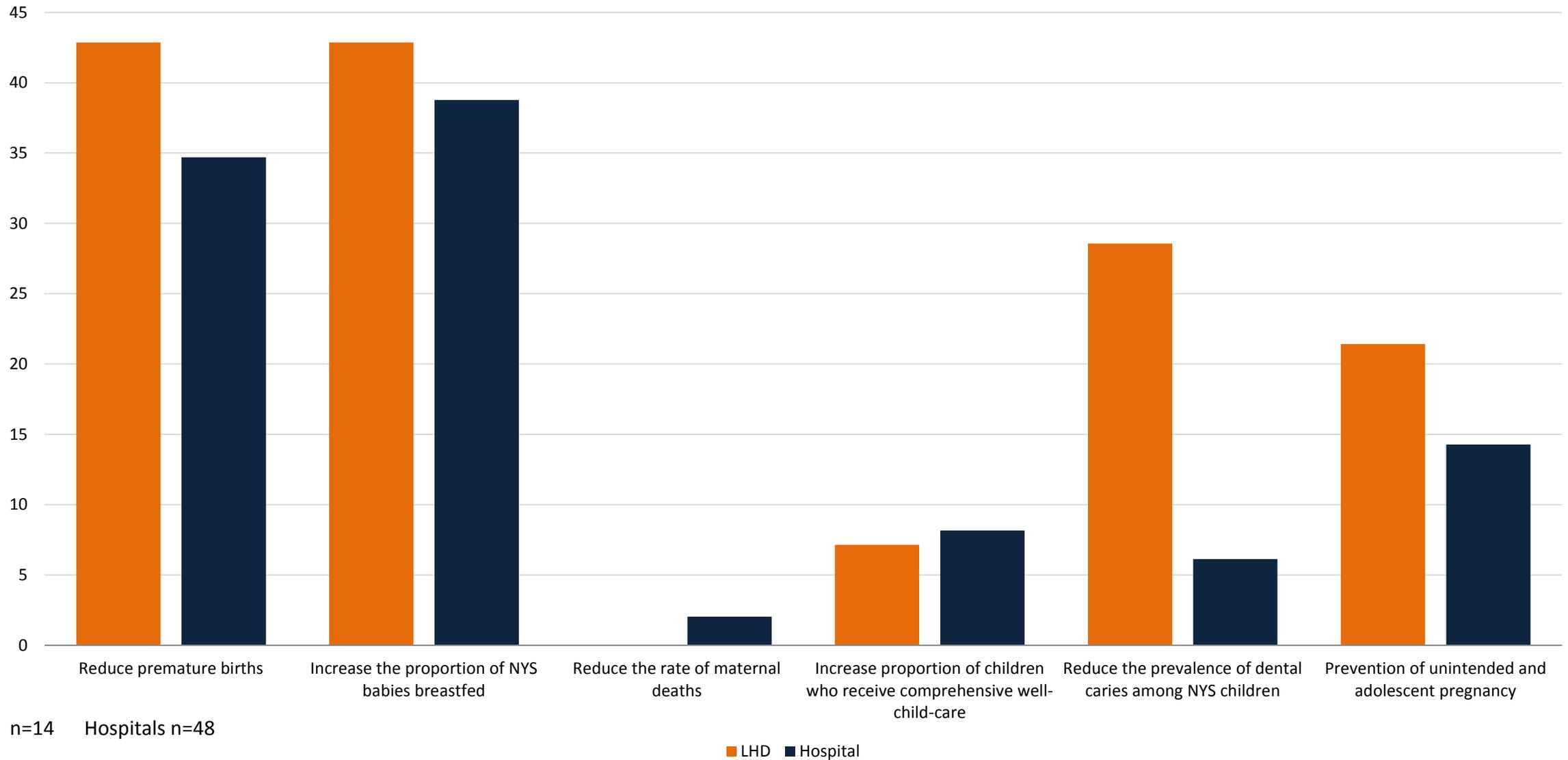
Prevent HIV/STDs, Vaccine Preventable Diseases and Healthcare Associated Infections interventions, December 2016



LHD n=0 Hospitals n=17

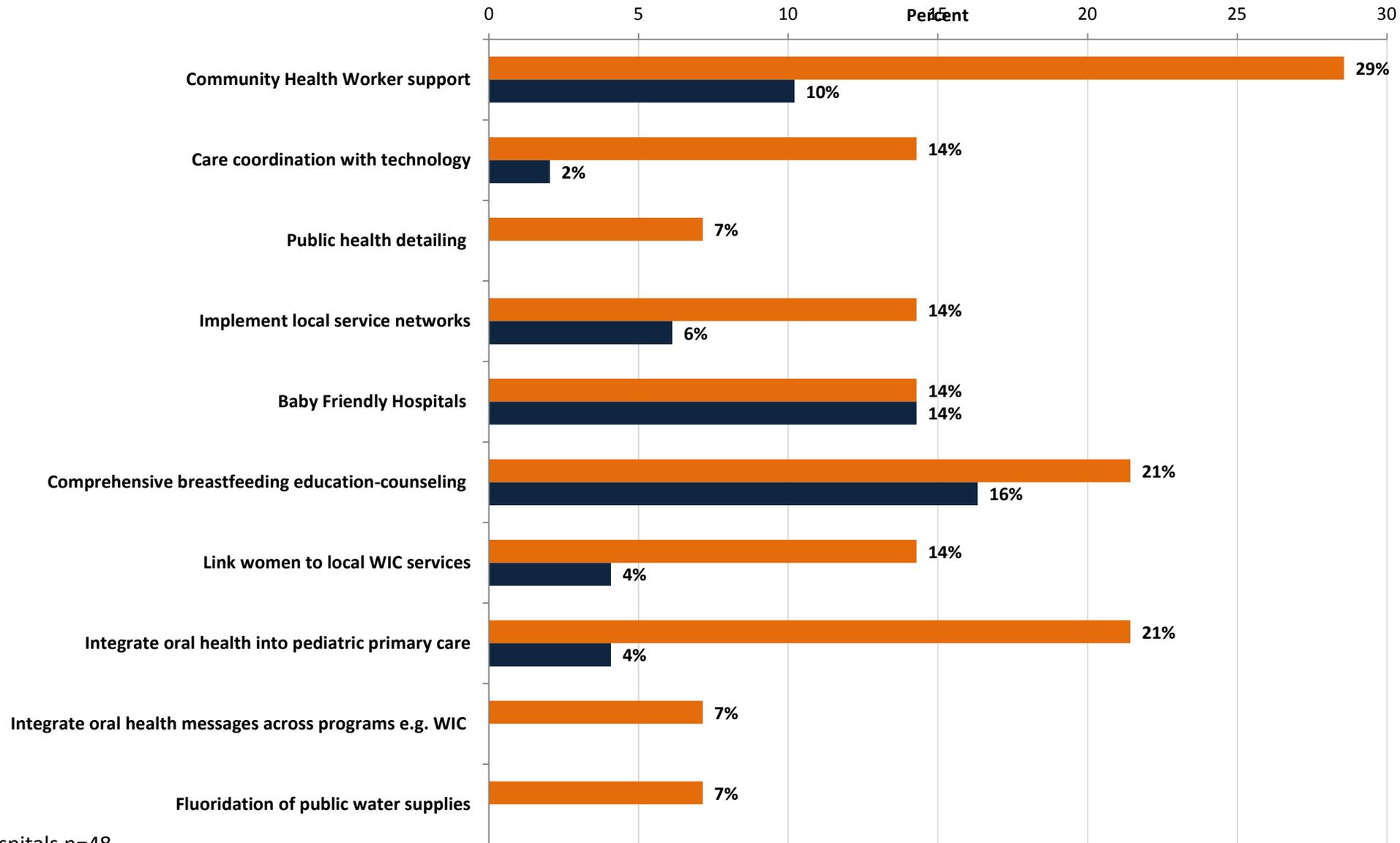
NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

Promote Healthy Women, Infants, Children Goals, December 2016



NOTE: Organizations often indicated working in more than one focus area in each of their chosen priority areas

Promote Healthy Women, Infants, Children Interventions, December 2016



LHD n=14 Hospitals n=48

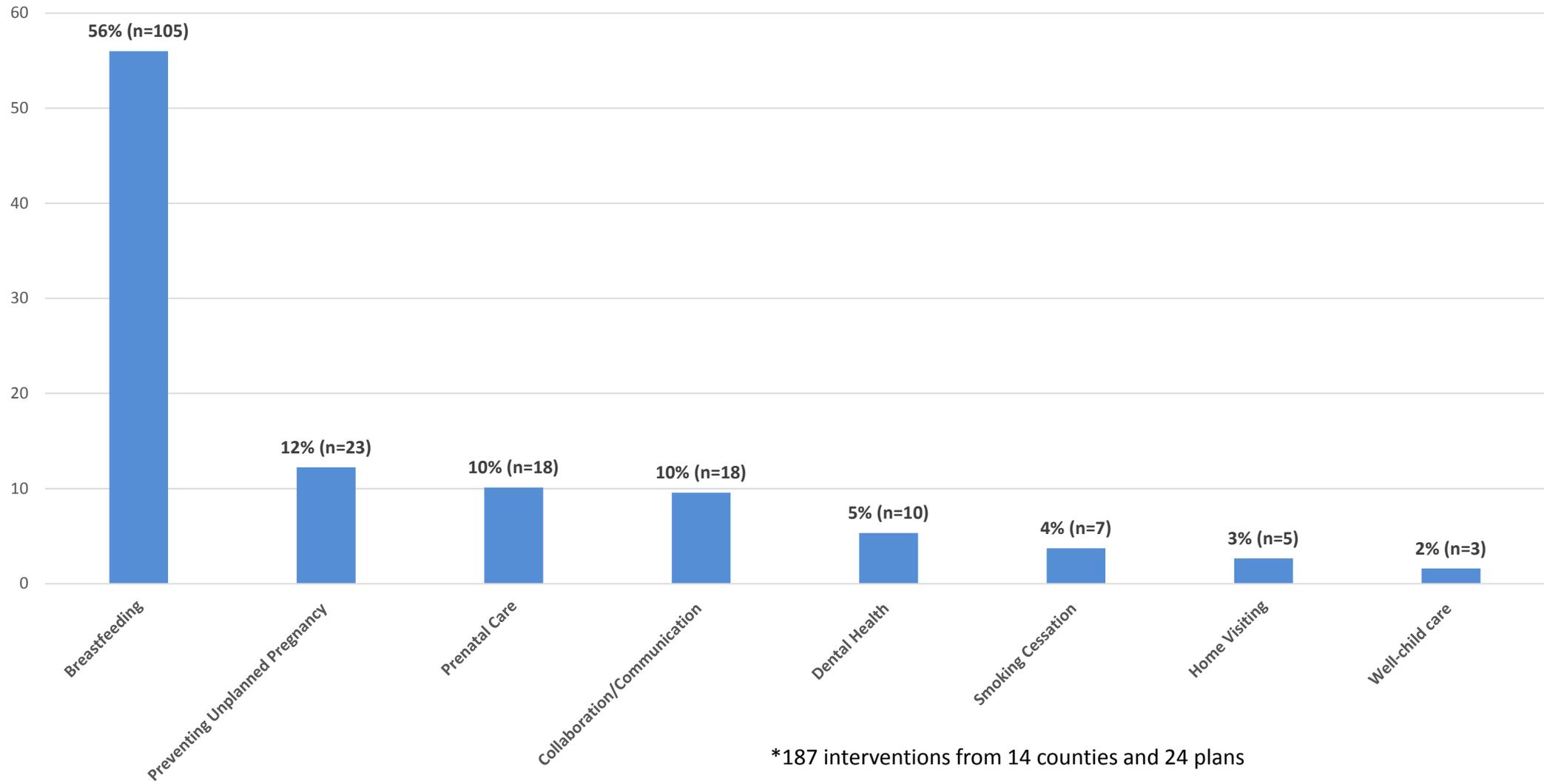
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■ LHD ■ Hospital

Healthy Women, Infants, and Children: A deeper study

- A deeper study was conducted among 14 counties that selected Healthy Women, Infants and Children as a “shared” priority.
- “Shared” priorities were defined as those identified by the local health department and all hospitals in the county
- These 14 counties included 14 local health departments and 20 hospitals
- Data from reports were analyzed to answer three questions:
 1. What interventions are being implemented?
 2. How is progress being tracked?
 3. How are partners engaged?

Promote Healthy Women, Infants, and Children Interventions, December 2016



Healthy Women, Infants, and Children - What we learned

From the 24 plans analyzed:

- 22 focused on maternal-infant health, 5 on child health, and 6 on reproductive/preconception care
- **All plans included at least one evidence-based intervention**
- 56% of 187 interventions focused on increasing breast-feeding
- 78% in community setting and 21% in clinical setting
- Most plans had measures, and interventions were connected with measures
- Of the 164 tracking process measures: 40% input (e.g. number of people referred), 55% output (e.g. number of breastfeeding policies established) and **4% impact** (e.g. percent of infants who are exclusively breastfed)
- Addressing **disparities not often clear in intervention or measures**

Overall Notable Strengths and Challenges

Common strengths

- Concise executive summaries that can be used to communicate efforts
- Robust community health assessments with current data, comparisons with standards
- Included clear rationale for prioritization
- Collaboration with many partners and citizens in planning and implementation
- Working to promote health equity in at least one Priority Area

Common challenges

- Although a strength of many plans, a rationale for prioritization was not always clear
- About 15% of plans were not explicitly using evidence based interventions for two priorities
- Insufficient information on strategies to address disparities
- Lack of process for monitoring interventions
- Lack of description on process for sustaining improvement efforts

Technical Support Opportunities

- Implementing evidence-based and best-practice interventions
- Measuring impact
- Building on lessons learned
- Addressing disparities in interventions and tracking progress
- Developing and disseminating community health improvement stories
- Promoting diverse partnerships for health across all policies and healthy aging

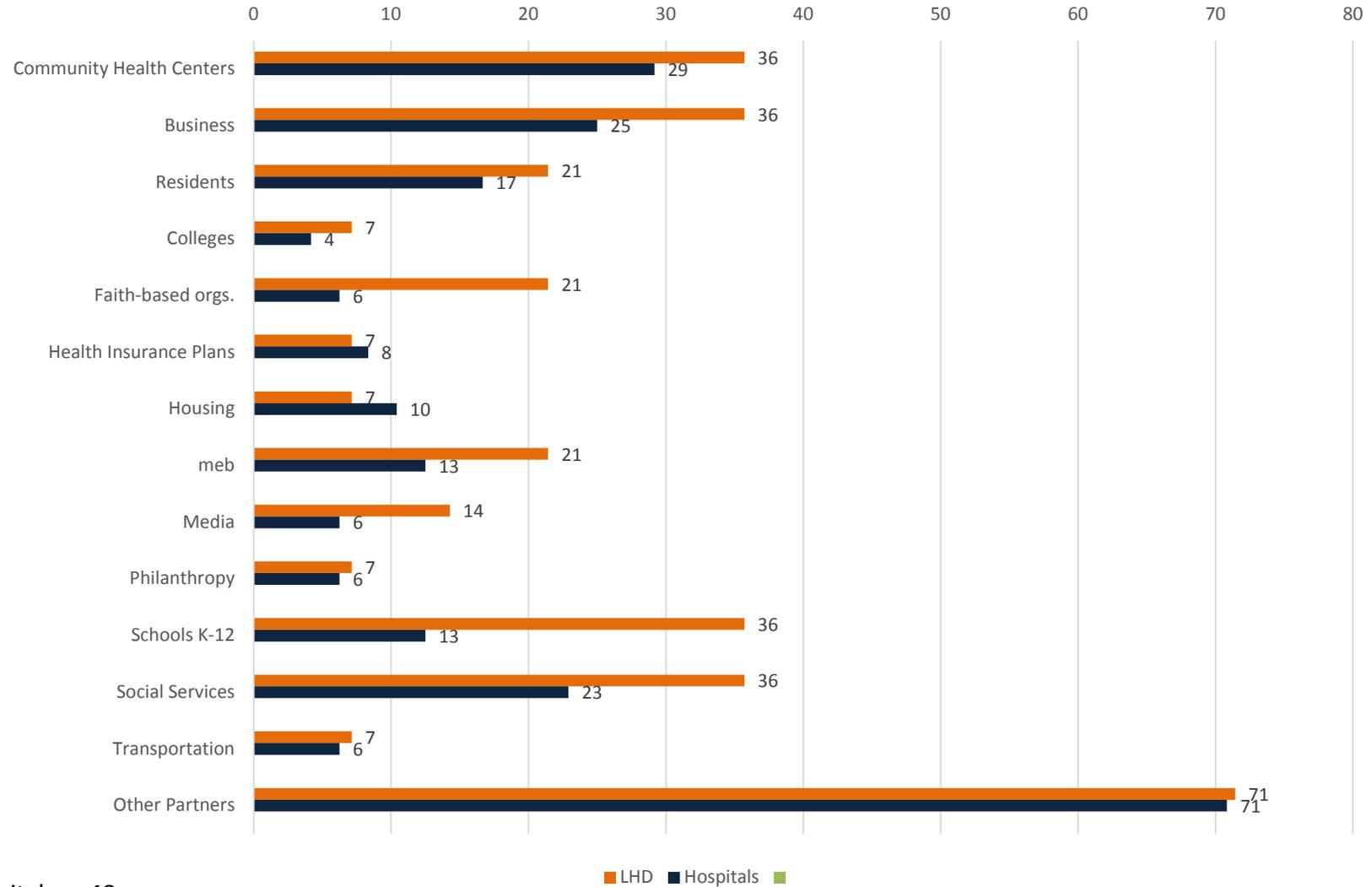
Additional Next Steps

- Email feedback letters to LHDs and hospitals including feedback on their local partnerships
- Complete deeper analysis of interventions, measures and partners for four other priorities:
 - What interventions are being implemented?
 - How is progress being tracked?
 - How are partners engaged?
- Disseminate findings among DOH programs, regional staff, state and local partners including PHIPs
- Start developing 2019 – 2025 Prevention Agenda

Questions?

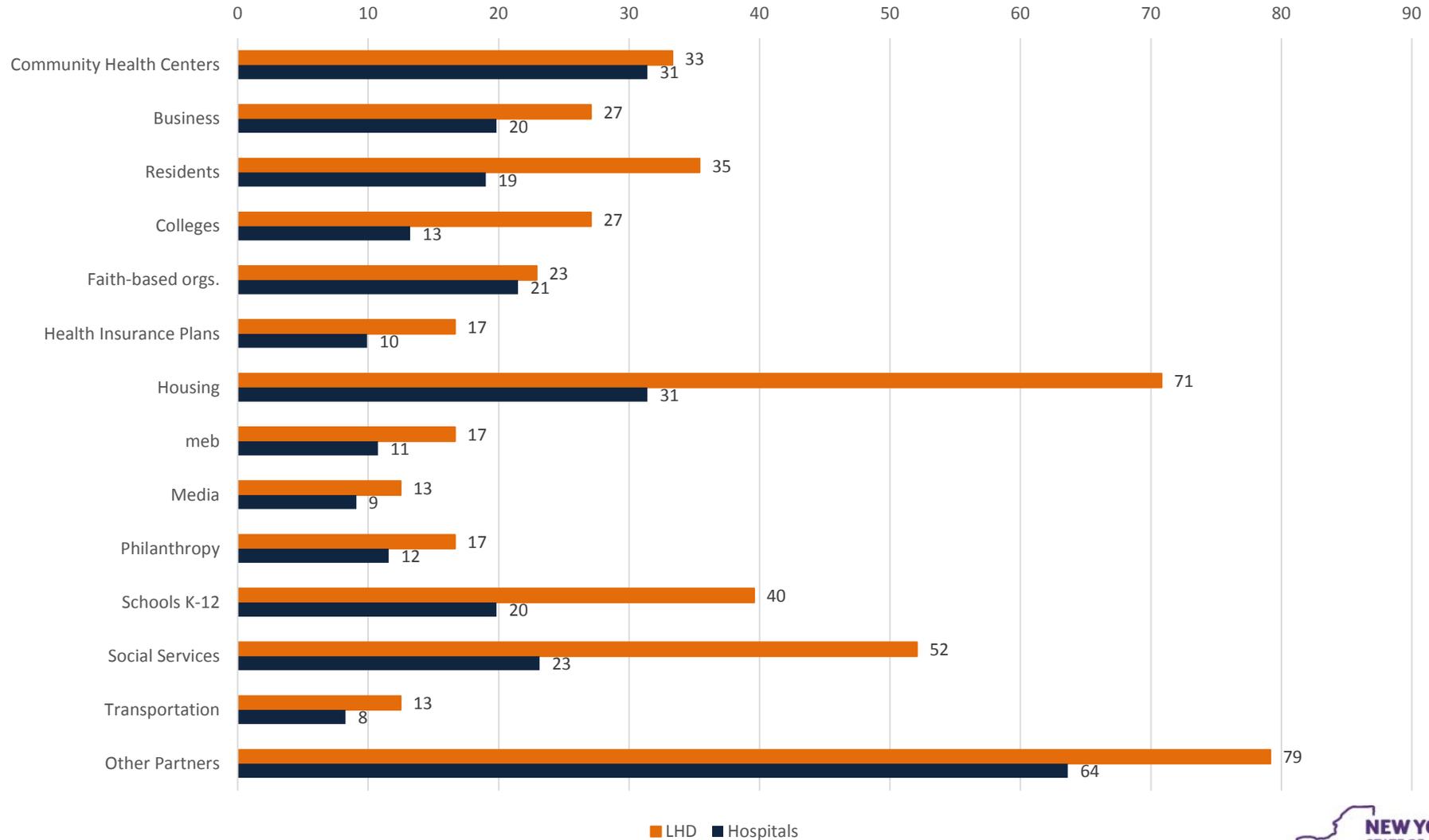
prevention@health.ny.gov

Promote Healthy Women, Infants and Children: Partners Engaged, December 2016



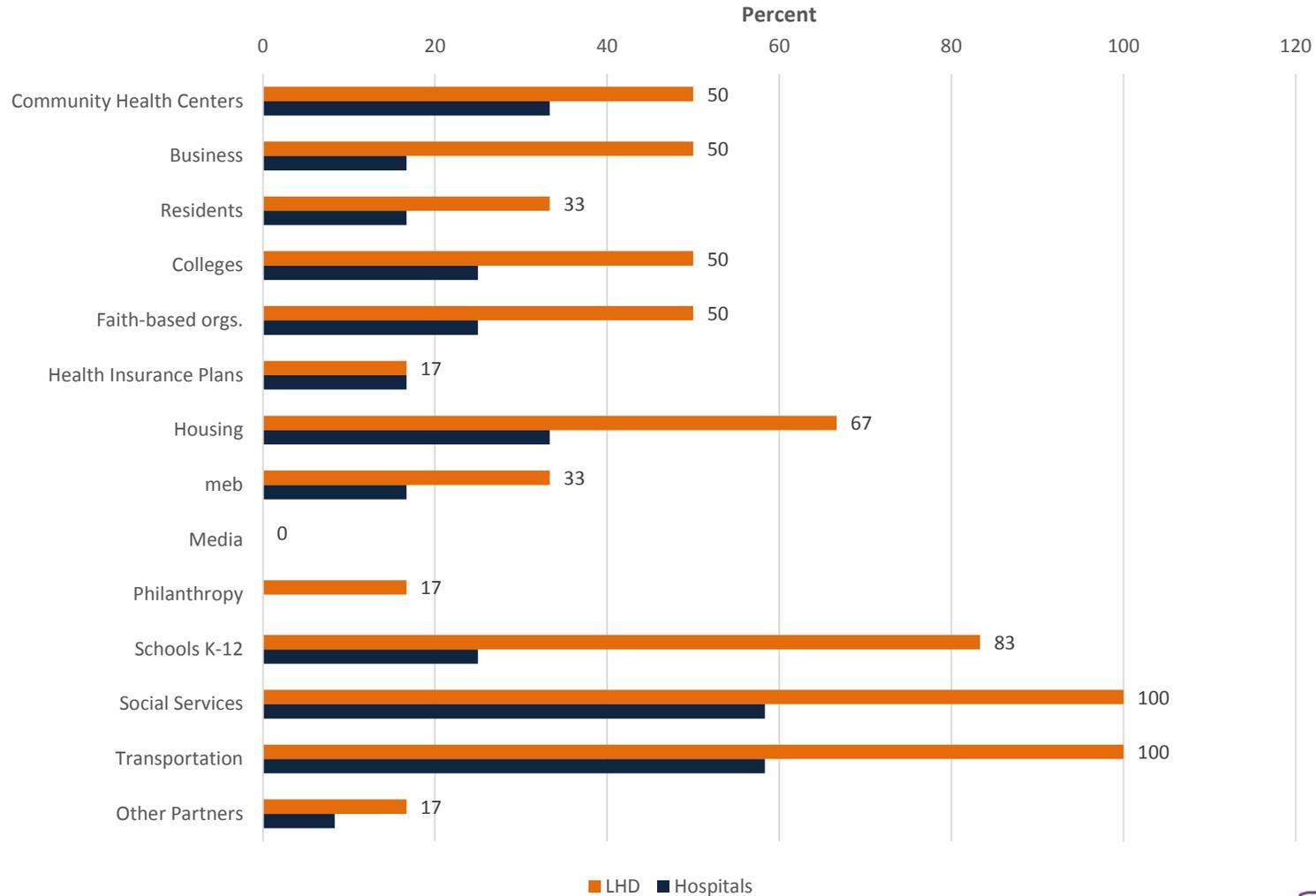
LHD n=14 Hospitals n=48

Promote Mental Health Prevent Substance Abuse: Partners Engaged, December 2016



LHD n=48 Hospitals n=121

Promote Healthy and Safe Environment: Partners Engaged, December 2016



LHD n=6 Hospitals n=12