



# NYS Prevention Agenda 2019-2024

## Presentation to NYS Public Health and Health Planning Council

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December 13, 2018



# NYS Prevention Agenda

- Goal is improved health status of New Yorkers and reduction in health disparities through increased emphasis on prevention.
- Call to action to broad range of stakeholders to collaborate at the community level to assess local health status and needs; identify local health priorities; and plan, implement and evaluate strategies for local health improvement.
- Led by Ad Hoc Committee appointed by the NYS Public Health and Health Planning Council.

# Traveling Together...

## Health Across All Policies



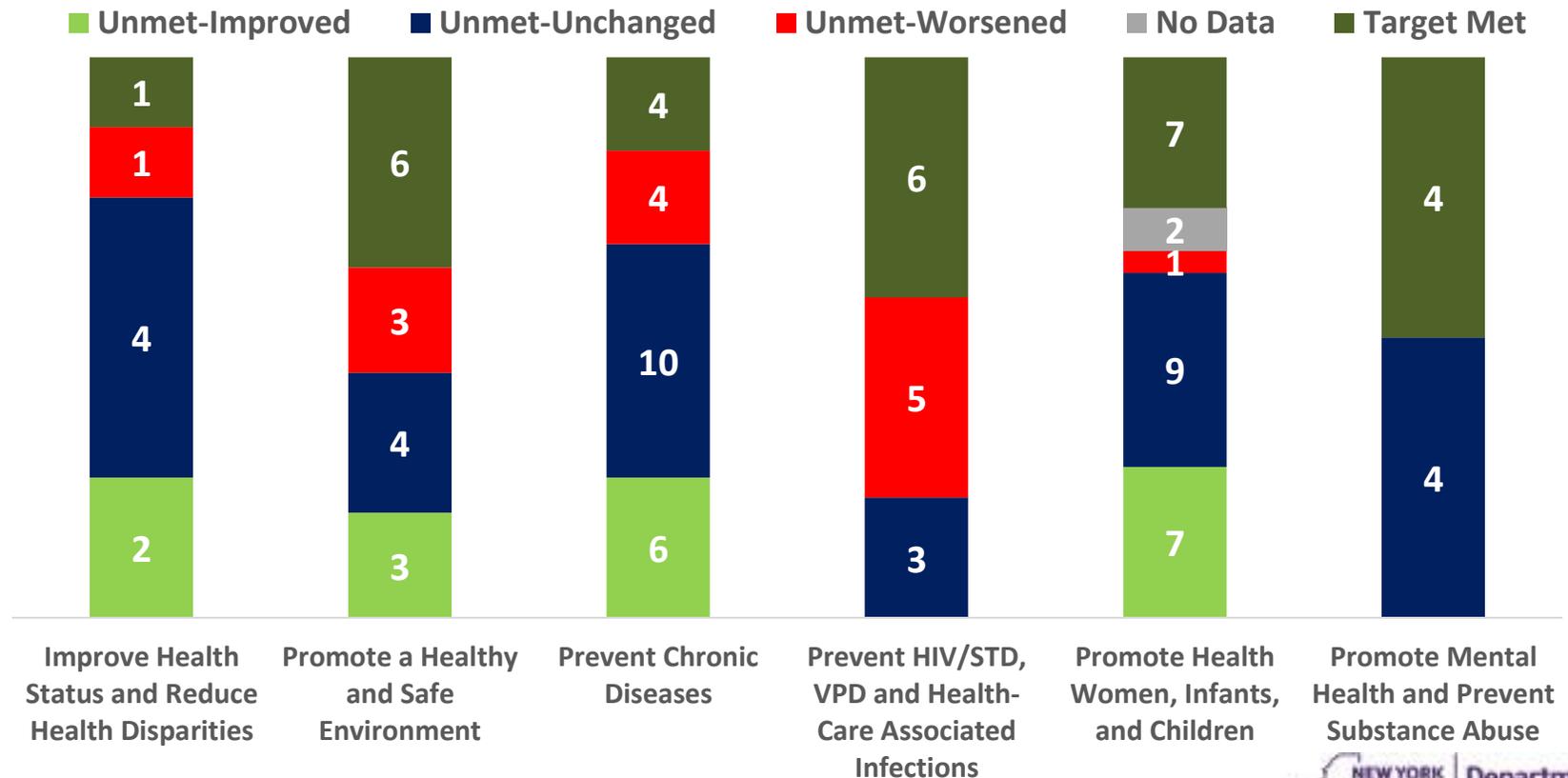
NYAM



AARP



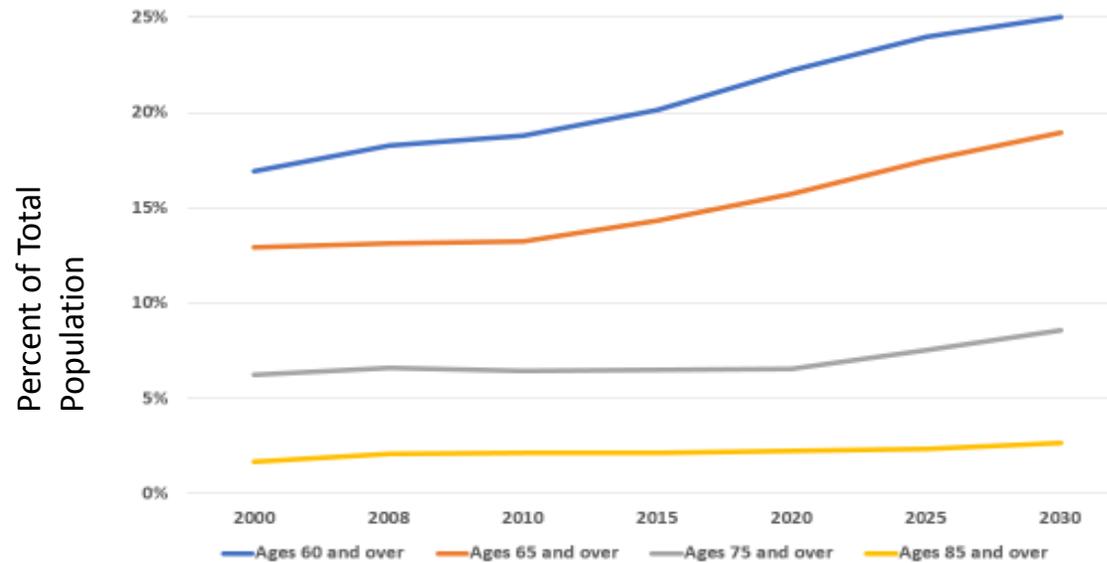
## Overall progress on 96 Prevention Agenda Indicators



As of September 2018

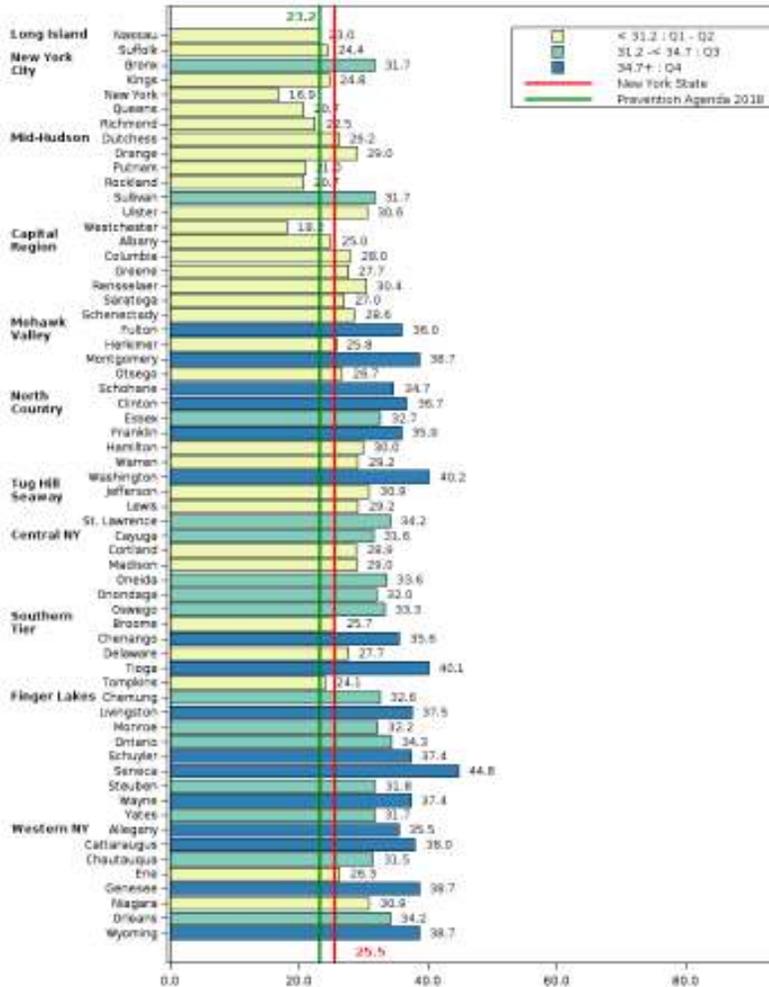
<https://health.ny.gov/preventionagendadashboard>

## Trends in aging populations, New York State, 2000-2030\*



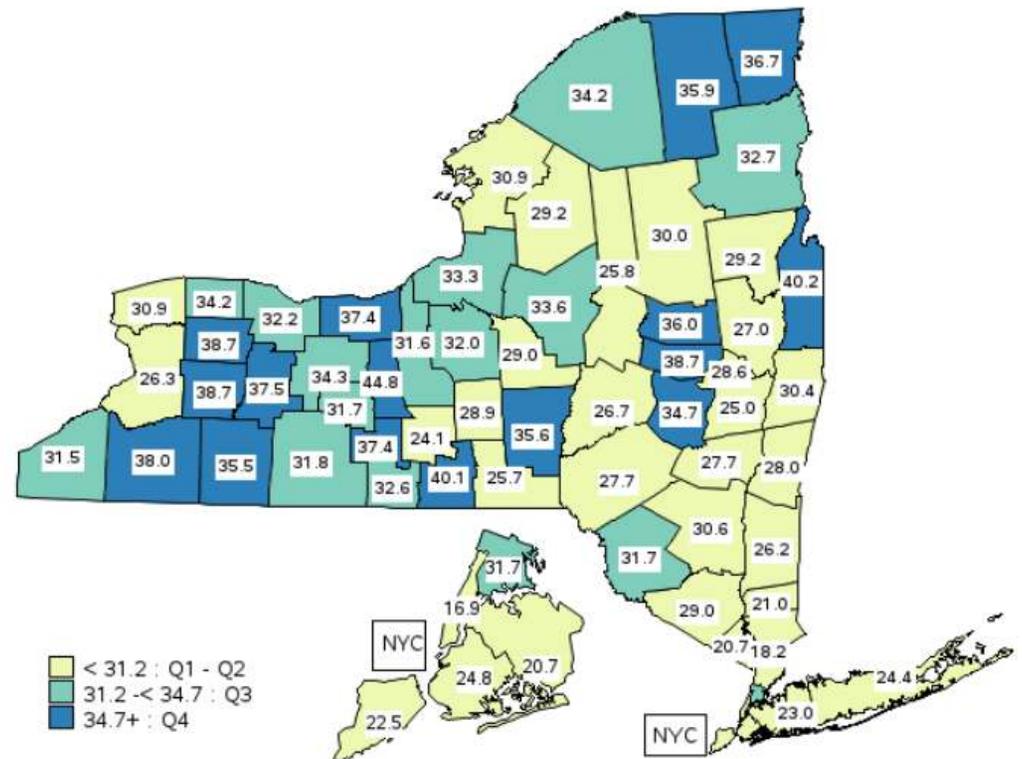
Population Trends	2000	2008	2010	2015	2020	2025	2030
Total Population	19,000,135	19,460,969	19,566,610	19,673,174	20,266,341	20,693,354	21,195,944
Ages 60 and over	3,211,738	3,558,460	3,677,891	3,965,446	4,499,549	4,962,734	5,302,667
Ages 65 and over	2,452,931	2,559,826	2,588,024	2,820,435	3,191,141	3,615,695	4,020,308
Ages 75 and over	1,180,878	1,281,459	1,259,873	1,282,467	1,332,145	1,561,652	1,815,879
Ages 85 and over	314,771	403,129	417,164	422,641	454,298	486,682	566,423

Data Source: NYS Data Book, US Census 2015, \*2020, 2025, 2030 date were projected by NYSOFA



### Percentage of adults who are obese, 2016

Prevention Agenda 2018 Objective: 23.2



Data Source: NYS Behavioral Risk Factor Surveillance System data as of February 2018

# NYS Health Assessment: Summary of Health Issues

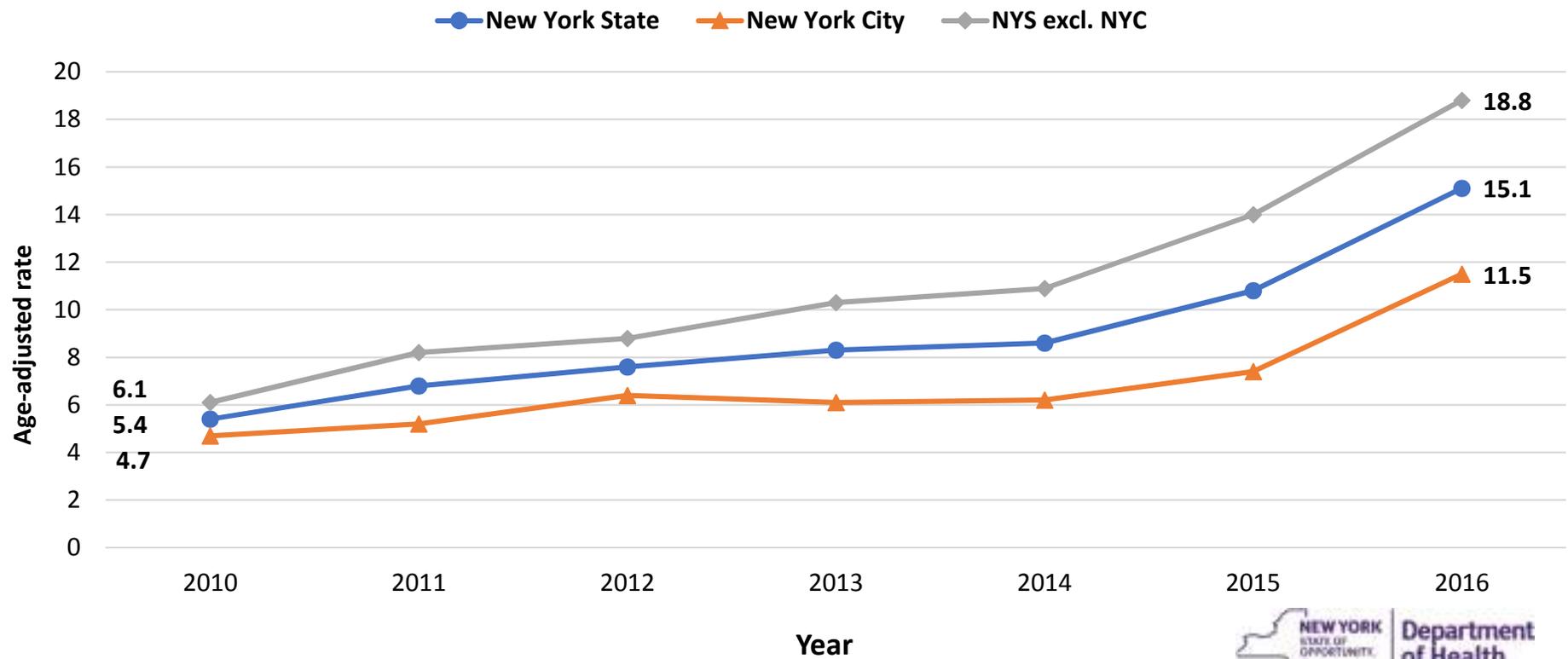
- Chronic diseases continue to be a major burden including heart diseases, cancers, diabetes, and asthma.
- We are making good progress in some maternal and infant health indicators including teen pregnancy and breastfeeding but more work to be done to address the disparities related to infant mortality, preterm birth, and maternal mortality.
- We are on the path to end AIDS, but STIs and Hep C remain concerns.
- Drinking water quality has become a leading priority and New York State is leading the nation.
- Most importantly, opioid overdose is a major issue that is contributing to declining life expectancy.

## Leading causes of death, New York State, 2009-2015

	Total Deaths	#1 Cause of Death	#2 Cause of Death	#3 Cause of Death	#4 Cause of Death	#5 Cause of Death	#6 Cause of Death	#7 Cause of Death
2015	Total Deaths 153,623 644.0 per 100,000	Heart Disease 44,141 180.3 per 100,000	Cancer 34,795 147.1 per 100,000	CLRD 7,066 29.7 per 100,000	Unintentional injury 6,372 28.5 per 100,000	Stroke 6,216 25.7 per 100,000	Pneumonia and Influenza 4,818 19.8 per 100,000	Diabetes 4,003 16.9 per 100,000
2014	Total Deaths 149,086 632.7 per 100,000	Heart Disease 42,836 177.1 per 100,000	Cancer 35,084 150.5 per 100,000	CLRD 6,738 28.8 per 100,000	Stroke 6,132 25.8 per 100,000	Unintentional injury 5,820 27.1 per 100,000	Pneumonia and Influenza 4,647 19.3 per 100,000	Diabetes 4,043 17.3 per 100,000
2013	Total Deaths 147,445 634.0 per 100,000	Heart Disease 43,119 180.8 per 100,000	Cancer 35,078 152.9 per 100,000	CLRD 6,977 30.1 per 100,000	Stroke 5,961 25.3 per 100,000	Unintentional injury 5,553 26.0 per 100,000	Pneumonia and Influenza 4,846 20.3 per 100,000	Diabetes 4,035 17.5 per 100,000
2012	Total Deaths 147,390 644.8 per 100,000	Heart Disease 43,262 184.2 per 100,000	Cancer 35,600 158.2 per 100,000	CLRD 6,986 30.8 per 100,000	Stroke 6,029 26.1 per 100,000	Unintentional injury 5,455 25.8 per 100,000	Pneumonia and Influenza 4,389 18.7 per 100,000	Diabetes 3,970 17.5 per 100,000
2011	Total Deaths 147,105 656.0 per 100,000	Heart Disease 43,963 191.4 per 100,000	Cancer 35,032 158.6 per 100,000	CLRD 6,902 31.2 per 100,000	Stroke 6,153 27.1 per 100,000	Unintentional injury 5,249 25.0 per 100,000	Pneumonia and Influenza 4,874 21.2 per 100,000	Diabetes 3,921 17.7 per 100,000
2010	Total Deaths 144,913 658.5 per 100,000	Heart Disease 44,557 188.0 per 100,000	Cancer 35,092 161.6 per 100,000	CLRD 6,775 31.1 per 100,000	Stroke 6,120 27.5 per 100,000	Unintentional injury 4,720 22.7 per 100,000	Pneumonia and Influenza 4,592 20.4 per 100,000	Diabetes 3,606 16.5 per 100,000
2009	Total Deaths 144,874 659.6 per 100,000	Heart Disease 46,312 206.6 per 100,000	Cancer 34,822 160.5 per 100,000	CLRD 6,661 30.7 per 100,000	Stroke 5,823 26.2 per 100,000	Pneumonia and Influenza 4,460 20.0 per 100,000	Unintentional injury 4,268 20.5 per 100,000	Diabetes 3,684 16.9 per 100,000

Data Source: [https://apps.health.ny.gov/public/tabvis/PHIG\\_Public/lcd/reports/#state](https://apps.health.ny.gov/public/tabvis/PHIG_Public/lcd/reports/#state) - NYS Vital Statistics

Overdose deaths involving any opioid, age-adjusted rate per 100,000 population,  
by region, New York State 2010-2016



Data Source: CDC WONDER; accessed August 2018

# Stakeholder Feedback Summary

- Overall support for priorities, focus areas and goals
- Include actionable interventions to address emerging public health challenges:
  - Vaping and e-cigs, Gun Violence, Adverse Childhood Experiences, Opioids, Food Security...
- Include actionable interventions related to health and well-being of older adults in each priority area
- Be specific about how to reduce disparities and address challenges in low income and minority communities in each priority:
  - STIs, HIV, Maternal Mortality, air and water quality ...
- Promote Well Being is an important goal for both the Mental Health priority area and as a cross cutting principle.
- Need to keep it simple!

# Prevention Agenda 2019-24 Vision:

New York is the Healthiest State  
for People of all Ages

# Prevention Agenda 2019-2024

## Priority Areas

1. Prevent Chronic Diseases
2. Promote a Healthy and Safe Environment
3. Promote Healthy Women, Infants and Children
4. Promote Well-being and Prevent Mental and Substance Use Disorders
5. Prevent Communicable Diseases

## Prevent Chronic Diseases

### Focus Area 1: Healthy Eating and Food Security

#### Overarching Goal: Reduce obesity and the risk of chronic diseases

Goal 1.1: Increase access to healthy and affordable foods and beverages

Goal 1.2: Increase skills and knowledge to support healthy food and beverage choices

Goal 1.3: Increase food security

### Focus Area 2: Physical Activity

#### Overarching Goal: Reduce obesity and the risk of chronic diseases

Goal 2.1: Improve community environments that support active transportation and recreational physical activity for people of all ages and abilities

Goal 2.2: Promote school, child care, and worksite environments that support physical activity for people of all ages and abilities

Goal 2.3: Increase access, for people of all ages and abilities, to safe indoor and/or outdoor places for physical activity

### Focus Area 3: Tobacco Prevention

Goal 3.1: Prevent initiation of tobacco use, including combustible tobacco and electronic vaping products (electronic cigarettes and similar devices) by youth and young adults

Goal 3.2: Promote tobacco use cessation, especially among populations disproportionately affected by tobacco use including: low SES; frequent mental distress/substance use disorder; LGBT; and disability

Goal 3.3: Eliminate exposure to secondhand smoke and exposure to secondhand aerosol/emissions from electronic vapor products

### Focus Area 4: Preventive Care and Management

Goal 4.1: Increase cancer screening rates for breast, cervical, and colorectal cancer

Goal 4.2: Increase early detection of cardiovascular disease, diabetes, prediabetes and obesity

Goal 4.3: Promote the use of evidence-based care to manage chronic diseases

Goal 4.4: Improve self-management skills for individuals with chronic conditions

## Promote a Healthy and Safe Environment

<b>Focus Area 1: Injuries, Violence and Occupational Health</b>
Goal 1.1: Reduce falls among vulnerable populations
Goal 1.2: Reduce violence by targeting prevention programs particularly to highest risk populations
Goal 1.3: Reduce occupational injuries and illness
Goal 1.4: Reduce traffic related injuries for pedestrians and bicyclists
<b>Focus Area 2: Outdoor Air Quality</b>
Goal 2.1: Reduce exposure to outdoor air pollutants
<b>Focus Area 3: Built and Indoor Environments</b>
Goal 3.1: Improve design and maintenance of the built environment to promote healthy lifestyles, sustainability, and adaptation to climate change
Goal 3.2: Promote healthy home and school environments
<b>Focus Area 4: Water Quality</b>
Goal 4.1: Protect water sources and ensure quality drinking water
Goal 4.2: Protect vulnerable waterbodies to reduce potential public health risks associated with exposure to recreational water
<b>Focus Area 5: Food and Consumer Products</b>
Goal 5.1: Raise awareness of the potential presence of chemical contaminants and promote strategies to reduce exposure
Goal 5.2: Improve food safety management

## Promote Healthy Women, Infants and Children

### Focus Area 1: Maternal & Women's Health

Goal 1.1: Increase use of primary and preventive health care services by women of all ages, with a focus on women of reproductive age

Goal 1.2: Reduce maternal mortality and morbidity

### Focus Area 2: Perinatal & Infant Health

Goal 2.1: Reduce infant mortality and morbidity

Goal 2.2: Increase breastfeeding

### Focus Area 3: Child & Adolescent Health

Goal 3.1: Support and enhance children and adolescents' social-emotional development and relationships

Goal 3.2: Increase supports for children and youth with special health care needs

Goal 3.3: Reduce dental caries among children

### Focus Area 4: Cross Cutting Healthy Women, Infants, & Children

Goal 4.1: Reduce racial, ethnic, economic, and geographic disparities in maternal and child health outcomes and promote health equity for maternal and child health populations

## Promote Well-Being and Prevent Mental and Substance Use Disorders

### Focus Area 1: Promote Well-Being

Goal 1.1: Strengthen opportunities to build well-being and resilience across the lifespan

Goal 1.2: Facilitate supportive environments that promote respect and dignity for people of all ages

### Focus Area 2: Prevent Mental and Substance Use Disorders

Goal 2.1: Prevent underage drinking and excessive alcohol consumption by adults

Goal 2.2: Prevent opioid and other substance misuse and deaths

Goal 2.3: Prevent and address adverse childhood experiences (ACEs)

Goal 2.4: Reduce the prevalence of major depressive disorders

Goal 2.5: Prevent suicides

Goal 2.6: Reduce the mortality gap between those living with serious mental illness and the general population

## Prevent Communicable Diseases

<b>Focus Area 1: Vaccine-Preventable Diseases</b>
Goal 1.1: Improve vaccination rates
Goal 1.2: Reduce vaccination coverage disparities
<b>Focus Area 2: Human Immunodeficiency Virus (HIV)</b>
Goal 2.1: Decrease HIV morbidity (new HIV diagnoses)
Goal 2.2: Increase viral suppression
<b>Focus Area 3: Sexually Transmitted Infections (STIs)</b>
Goal 3.1: Reduce the annual rate of growth for STIs
<b>Focus Area 4: Hepatitis C Virus (HCV)</b>
Goal 4.1: Increase the number of persons treated for HCV
Goal 4.2: Reduce the number of new HCV cases among people who inject drugs
<b>Focus Area 5: Antibiotic Resistance and Healthcare-Associated Infections</b>
Goal 5.1: Improve infection control in healthcare facilities
Goal 5.2: Reduce infections caused by multidrug resistant organisms and C. difficile
Goal 5.3: Reduce inappropriate antibiotic use

# Prevention Agenda 2019-2024: Prevent Chronic Diseases

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## Overview

Chronic diseases such as cancer, diabetes, heart disease, stroke and asthma are among the leading causes of death, disability and rising health care costs in New York State (NYS). However, chronic diseases are also among the most preventable. Three modifiable risk behaviors - unhealthy eating, lack of physical activity, and tobacco use - are largely responsible for the incidence, severity and adverse outcomes of chronic disease. As such, improving nutrition and food security, increasing physical activity, and preventing tobacco use form the core of the *Preventing Chronic Diseases Action Plan*. The plan also emphasizes the importance of preventive care and management for chronic diseases.

Some organizations and communities<sup>1,2</sup> have found the [3-4-50 framework](#) a helpful way to focus interventions on the **three** behaviors (unhealthy eating, lack of physical activity, and tobacco use) that contribute to **four** chronic diseases (cancer, heart disease and stroke, type 2 diabetes and chronic lung diseases) that cause over **50** percent of all deaths worldwide.

Additional information about the burden of chronic diseases, underlying risk factors, associated disparities, and social determinants of health can be found at: [Link to the burden documents](#)



## Focus Area 1. Healthy Eating and Food Security

### - Goals

Overarching Goal Reduce obesity and the risk of chronic disease

Goal 1 Increase access to healthy and affordable foods and beverages

Goal 2 Increase skills and knowledge to support healthy food and beverage choices

Goal 3 Increase food security

### + Objectives: By December 31, 2024

### + Interventions



<https://www.agriculture.ny.gov/AP/agservices/fmnp/fmnp-authorized-markets.html>

Resources that make local food more affordable:

- Farmers Market Nutrition Program Checks
- SNAP
  - FreshConnect
  - Health Bucks
  - Double Up Food Bucks

# The Prevention Agenda has Led to Improved Community Health Planning Efforts Planning in NYS

## Pre-Prevention Agenda

Public Health Law set requirements for local community health improvement planning but hospitals and LHDs did it alone:

- Local health departments completed community health assessments (CHAs) and municipal public health service plans as per Article 6 of PH Law. Th
- Non profit hospitals completed community service plans (CSPs) as per Article 28 of PH Law. Plans were retrospective descriptions of actions taken to support community health.

## Prevention Agenda 2008 - 2012

- LHDs asked to conduct a CHA and to collaborate with hospitals to identify shared local priorities aligned with Prevention Agenda for action to be described in hospital CSPs.
- CSPs became prospective plans.
- Development and implementation of community health improvement efforts challenging.

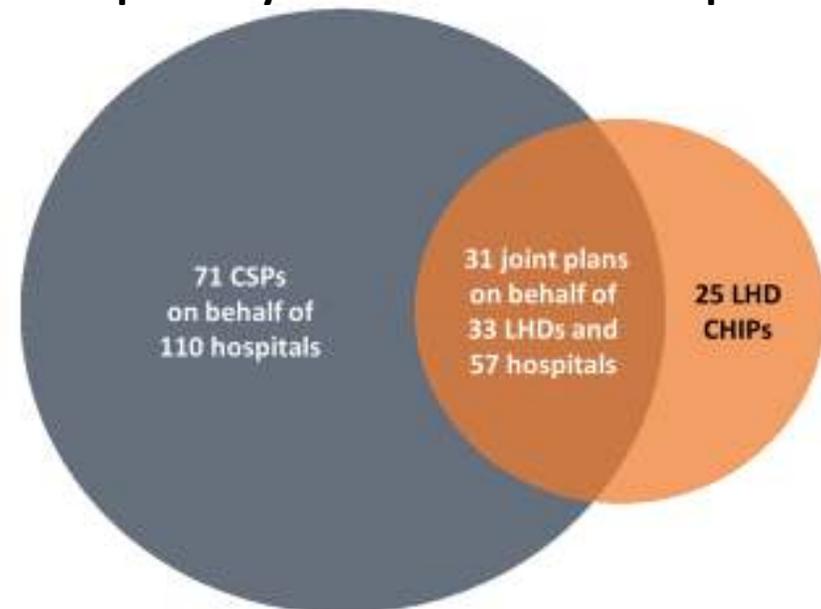
## Prevention Agenda 2013-2018

- LHDs asked to collaborate with hospitals and other partners on development of CHA and CHIPs and in 2016 strongly encouraged to do ONE plan.
- Hospitals asked to reflect collaborative CHA/CHP efforts in their CSP.
- NYSDOH provided feedback to both hospitals and LHDs and requiring annual updates
- Aligned guidance with PHAB and ACA requirements.
- Hospitals asked to report community benefit spending and to link community benefit and DSRIP spending with implementation of Prevention Agenda interventions.

## Prevention Agenda will continue to be blueprint for Local Community Health Improvement

- Local health departments, hospitals and other community organizations will conduct local collaborative community health assessment and improvement planning again starting 2019.
- LHDs and hospitals will be strongly encouraged to develop single collaborative plan – challenging for multi-county big hospital systems.
- Hospitals will be asked to describe how they are investing their resources to support local Prevention Agenda efforts.
- Hospitals have already been asked to connect the PA to their Certificate of Need application process.

127 plans by 58 LHDs and 167 Hospitals



# Hospital Community Benefit Investment

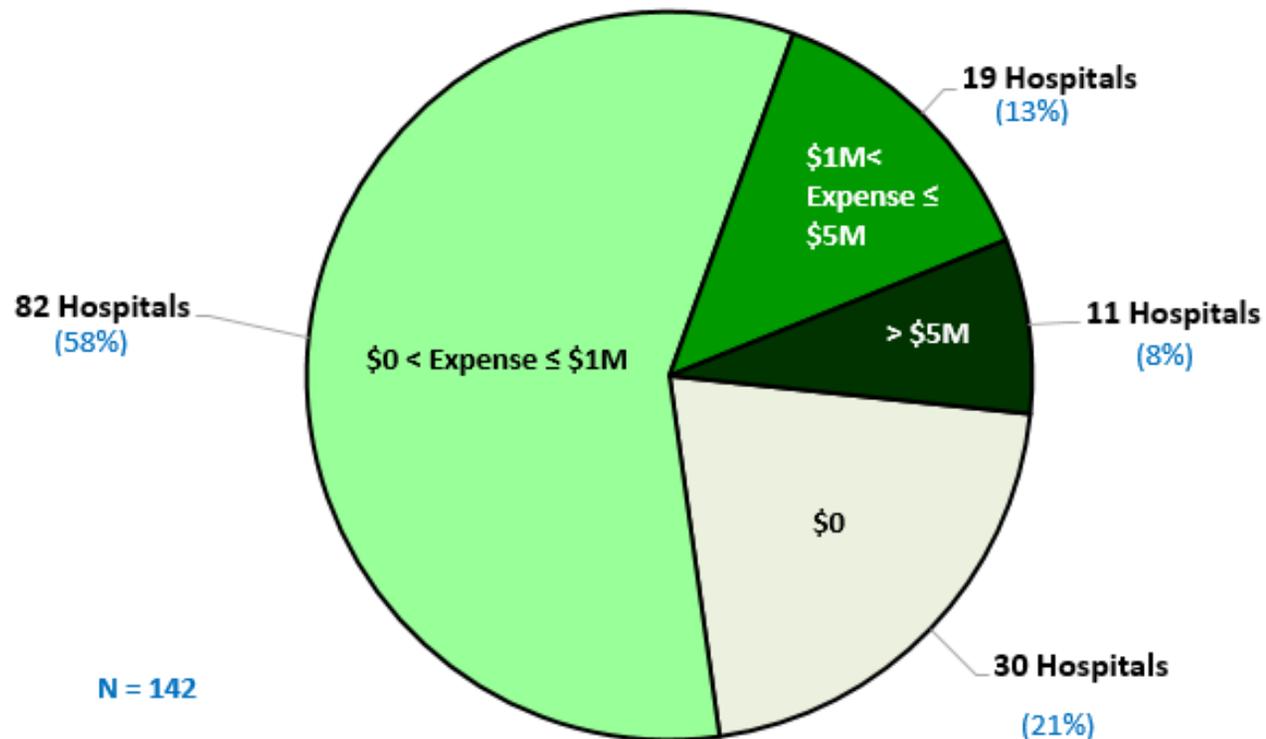
In 2016, community benefit accounted for 12.4% of NYS hospitals' total expenses, including 0.47% of expenses for community health improvement.

## Percentage of Total Operating Expenses among Hospitals in New York State

Community Benefit	2010	2011	2012	2013	2014	2015	2016
<b>All Categories</b>	<b>10.2%</b>	10.8%	11.1%	11.3%	12.0%	12.6%	<b>12.4%</b>
Charity Care	1.03%	1.25%	1.03%	1.04%	0.85%	0.77%	0.88%
Unreimbursed Cost for Means Tested Government Programs	3.63%	3.54%	3.83%	4.40%	5.02%	5.17%	5.43%
Subsidized Health Services	1.06%	0.98%	1.01%	1.07%	1.13%	1.17%	1.21%
Community Health Improvement	<b>0.41%</b>	0.47%	0.53%	0.35%	0.41%	0.55%	<b>0.47%</b>
Cash or In-Kind Contributions	0.03%	0.04%	0.04%	0.07%	0.04%	0.04%	0.07%
Research	0.99%	1.10%	1.19%	0.75%	0.95%	0.94%	0.68%
Health Professions Education	3.09%	3.37%	3.45%	3.61%	3.62%	3.94%	3.68%

New York State Department of Health Office of Public Health Practice – Data current as of August 2018

## Uneven Spending on Community Health Improvement Services by Non-Profit Hospitals, NYS 2016



## Coming Soon: 2019 Population Health Summit!

- **February 28, 2019 in Albany**
- Celebrate progress, learn about updated Prevention Agenda, highlight Health Across all Policies and Healthy Aging efforts
- Connect communities working on common Prevention Agenda priorities to advance collaborations between public health, hospitals, and other sectors
- Sponsors:
  - NY Academy of Medicine
  - Institute for Family Health
  - NYU Langone Medical Center
  - United Hospital Fund
  - Primary Care Development Corporation
  - HRI/NYSDOH
  - NYS Health Foundation
  - Health Foundation of Western and Central NY
  - HANYS
  - NYSACHO
  - NYS Podiatric Medical Association
  - SUNY Albany School of Public Health
  - NYS Public Health Association
  - IPRO

