



**Suffolk County Qualitative Needs Assessment:
Findings from Community-Based Organization
Summit Events**

A Collaborative Approach to Assessing Community Needs

May 2016

Table of Contents

	page no.
Introduction	3-4
LIHC Partners	
Program Facilitators	
Overview of Service Area: Suffolk County	
Methodology	4-9
Event Planning and Structure	
Data Collection Tool	
Data Analysis	
County Differentiation	
Selection of Codes	
Categories and Sub-Categories	
Methodology for Deeper Dive (Second Analysis)	
New York State Department of Health Prevention Agenda Areas	
Summary of Findings	10-30
Distinct Prevention Area by Ranking	
Cumulative Prevention Area by Ranking	
Prevention Agenda Areas by Focus Area	
Disparities, Barriers, Education and Additional Services	
Deeper Dive: Mental Health, Education and Access to Care	
Community-Based Partners	31-44
Participating Organizations	
Services Provided	
Conclusion	45-46
Appendix	47-49
Script for Community-Based Organization Summit Event Facilitators	

Introduction

Long Island Health Collaborative Partners

The Long Island Population Health Improvement Program (LIPHIP) is a New York State Department of Health grant-funded initiative designed to promote population health activities. The LIPHIP is organized by the Nassau-Suffolk Hospital Council (NHSC), the membership association for all hospitals on Long Island. The core of the LIPHIP is an extensive workgroup of committed partners who agree to work together to improve the health of all Long Islanders.

Advisory Committee Members and Program Facilitators

The Long Island Health Collaborative would like to thank members of the CBO Summit Advisory Committee who volunteered their time and expertise during the planning and execution of this event. Advisory Committee members attended countless meetings, provided oversight during development of data collection tools and some participated as lead-facilitators during the summit events.

- Harriet Gourdine-Adams, Chief Officer for Care Coordination, Tri Care Systems DBA LIAAC
- Celina Cabello, Epidemiologist, Nassau County Department of Health
- Laurel Janssen-Breen*, Associate Professor, Assistant Chair, Department of Nursing, St. Joseph's College
- Tavora Buchman, Director, Quality Improvement, Epidemiology and Research, Director, Tuberculosis Control, Nassau County Department of Health
- Elizabeth Cohn, Director, Center for Health Innovation, Adelphi University
- Nancy Copperman, Assistant Vice President, Public Health and Community Partnerships, Strategic Planning, Northwell Health, Nassau-Queens PPS
- Linda Efferen, Medical Director, Suffolk Care Collaborative
- Amy Hammock*, Assistant Professor, Department of Family, Population and Preventative Medicine, Stony Brook Medicine
- Chris Hendriks, Vice President, Public & External Affairs, Catholic Health Services of Long Island
- Grace Kelly Mc-Govern, Public Relations Director, Suffolk County Department of Health
- John J. Perkins Jr. EPIC Physician Co-Champion, St. Charles Hospital Rehabilitation Liaison
- Matt Tannenbaum, Nutrition Intern, Northwell Health
- Karen Tripmacher, Director, Community Education and Health Benefit, Winthrop University Hospital
- Althea Williams, Senior Manager, Provider and Community Engagement, Suffolk Care Collaborative

LHC member organizations Adelphi University and St. Joseph's College provided meeting space and served as the host for both events.

* Amy Hammock and Laurel Janssen-Breen hold expertise in facilitation skills and qualitative analysis, serving as valuable key-leaders during the facilitator training for LHC members.

Overview of Service Area

Suffolk County, comprising the eastern region of Long Island, is an area of growing diversity, cultures and population characteristics. Data presented within this report will demonstrate the relationship between health disparities and a wide range of socioeconomic factors. Our findings confirm the presence of the

correlation between health status to a variety of social determinants including race, ethnicity, gender, language, age, disabilities, and financial security. Elimination of disparities is a priority throughout the Long Island region as bridging of gaps and services will ultimately improve health outcomes and quality of life for community members throughout Suffolk County.

The Long Island Population Health Improvement Program (LIPHIP) is a New York State Department of Health, grant-funded initiative, designed to promote population health activities. The LIPHIP is organized by the Nassau-Suffolk Hospital Council (NSHC), the membership association for all hospitals on Long Island. The core of the LIPHIP is an extensive workgroup of committed partners who agree to work together to improve the health of all Long Islanders. This workgroup, called the Long Island Health Collaborative, consists of the two county health departments, all hospitals on Long Island, physician leaders, representatives from nursing and mid-level provider associations, dozens of community-based health and social service organizations, academic institutions, health plans, local municipalities, and many other sectors.

The Suffolk County Department of Health and Nassau County Department of Health along with all hospitals located on Long Island appointed the LIPHIP as the workgroup lead for collecting data to propel the Community Health Needs Assessment Cycle 2016-2018. To address our desire to capture the valuable perspectives of representatives from community-based organizations and social service agencies on Long Island, the LIPHIP planned two Summit Events during which qualitative data was collected. Representatives from a comprehensive network of organizations who possess unparalleled experience working with community members throughout Long Island were invited to participate during the events. Participating organizations emphasized the importance of an opportunity to network and share expertise amongst counterpart agencies as a value-added benefit during events. Collaborative spirit was bountiful and indicative of the passion and commitment community agencies have for improving health outcomes on Long Island.

Qualitative data collected during facilitated discussion summit events has been analyzed, interpreted and presented within the *Summary of Findings* section. This report will serve as a county-level framework for informing Community Health Improvement Plans as well as plans for intervention. This tool will be publically available through the Long Island Population Health Improvement Program Website, and will be useful to a multidisciplinary spectrum of professional organizations who serve the community. Aspects covered include identifying priority areas according to the New York State Department of Health Prevention Agenda 2013-2017, reoccurring themes outside of the Prevention Agenda parameters, health disparities and barriers to care and novel recommendations for improving services and programs.

Methodology

Event Planning and Structure

An advisory committee was established to provide oversight of strategic planning Community Based Summit Events. Advisory committee members included leaders in health from stakeholder organizations, primarily Long Island Health Collaborative (LIHC) members, who hold a vested interest in the outcome of community improvement strategies and identification of primary areas of need. Of this committee, two members participated as key leaders, selected due to their extensive background in qualitative research and facilitation skills. These key leaders, Dr. Laurel Janssen-Breen, Associate Professor, St. Joseph's College and Amy Hammock, Assistant Professor, Stony Brook University presented an interactive, hands-on curriculum and training for LIHC members who volunteered to take the role of facilitators during the events.

Seating assignment of participants at facilitated discussion tables was randomized, with seven to twelve participants seated at a table. After permission was granted by participants, they were guided through scripted-facilitated discussion by a trained facilitator. Discussions were recorded and transcribed by certified court reporters.

Three summit events were hosted on different dates in varying locations to increase appeal and engagement toward a broad range of participating organizations.

- Adelphi University, Garden City NY, February 2, 2016
- St. Joseph's College, Patchogue, NY, February 10, 2016
- Online Based Summit, WebEx, February 12, 2016

Attendance was robust, with 45 organizations in representation at the Nassau County Event; 72 organizations at the Suffolk County Event and 2 organizations during the CBO Summit Event. In total, 119 organizations participated, which contributed to the diversity and breadth of qualitative data collected during events.

Data Collection Tool

A script for facilitators was developed and used as our primary data collection tool. Adapted from the Nassau County Department of Health's Key Informant Interview script, this tool was revised to meet a facilitated discussion format. Script components include: Introductions, Request for Permissions, Instructions, Event Guidelines and Questions. Questions were composed thoughtfully as to evoke an inherent response at first and then expanded upon to encourage digging deeper to obtain a more focused response. Questions pertain to health problems and concerns, health disparities, barriers to care, services available and opportunities for improvement.

Court reporters were positioned at each table during the event to capture conversations accurately. Post-event, transcriptions were transcribed and provided to us in Microsoft Office Word document Format.

Data Analysis

ATLAS TI Qualitative Data Analysis software was used to guide and structure analysis process. Members of the Qualitative Analysis team discussed strategy and logistics of project from beginning to completion of report. The analysis team's diversity boasts a wide range of analytic skill.

Analysis team:

- Dr. Laurel Janssen-Breen, Associate Professor Assistant Chair, St. Joseph's College
- Michael Corcoran, Data Analyst, Population Health Improvement Program
- Alyssa Dahl, Principal Research Analyst, Data Gen Healthcare Analytics
- Janine Logan, Senior Director, Nassau-Suffolk Hospital Council, Population Health Improvement Program
- Kate McCale, Director of Quality and Education, Rochester Regional Healthcare Association, Nassau-Suffolk Hospital Council
- Sarah Ravenhall, Program Manager, Population Health Improvement Program
- Kim Whitehead, Communications Specialist, Population Health Improvement Program

Alyssa Dahl, Principal Research Analyst served as the lead analyst on this project, during which time she offered expertise on strategy, direction, running qualitative data through Atlas TI software, producing meaningful synthesis of data elements and assisting in the description of the team's methodology.

County Differentiation: Within the Long Island region, bordering counties Nassau and Suffolk are distinct in character and complexity, driving our decision to separate the data by county. In order to maintain a unique identity for each County-level report, each quotation was coded as applicable to **one** county.

Quotations from bi-county organizations, who participated at the Suffolk event, were coded as Suffolk. Likewise, quotations from bi-county organizations participating during the Nassau event were coded as Nassau. Any quotation where the participant verbally or physically (by holding up the appropriate county card) indicated they were speaking on behalf of a county, were flagged accordingly.

The Atlas TI word-cruncher feature was used within Atlas TI to identify town names (Hempstead, Wyandanch, etc.) spoken in vivo in order to assign the appropriate county flags. If a bi-county organization specifically spoke about an issue within one of these communities, the quote was coded with the county in which that community lies. If the name of the town was being used as a figure of speech without a specific comment or anecdote about the community, the flags were not applied.

Strategy for selection of codes

The strategy for selection of codes was multi-layered to ensure all themes were included within the code-list. Key terminology from the New York State Prevention Agenda blueprint (https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/) was selected and applied. In addition, in vivo verbiage was taken directly from each transcript. Reading through each transcript and identifying words spoken in vivo (during the event) allowed the analysis team to compile a comprehensive list of selection codes.

Categories and sub-categories

Categories and sub-categories were selected using a combination of NYS Department of Health Priority Areas and Focus Area framework within Prevention Agenda blueprint, and key themes emerging from transcripts.

- Keywords were linked to each sub-category, for example: (A. *Chronic Disease 1. Diabetes*
Keywords: *Diabetes, A1C, amputations, blood glucose, blood sugar etc.*)

- A. Chronic Disease
 1. Diabetes
 2. Respiratory
 3. Cardiovascular
 4. Cancer
 5. Other Chronic Conditions
 6. Smoking
 7. Obesity/Nutrition
 8. Chronic Disease Prevention
 9. Chronic Disease Management
- B. Healthy and Safe Environment
 1. Injuries

2. Environment-Violence
 3. Environment-Air Quality
 4. Environment-Built
 5. Environment-Water
 6. Healthy and Safe Environment-Homes
 7. Healthy and Safe Environment-Access
- C. Healthy Women, Infants and Children
1. Children's Health
 2. Infants Health
 3. Pregnancy
 4. Childbirth
 5. Maternity/Mother
- D. Mental Health and Substance Abuse
1. Mental Health-Attitudes
 2. Mental Health-Treatment and Recovery
 3. Substance Abuse
 4. Eating Disorders
 5. Anxiety, Mood Disorders and associated emotions
 6. Suicide
 7. Mental Health- General
 8. Mental Health- Susceptible Populations
- E. HIV, STD, Vaccine Preventable Diseases and Health Care- Associated Infections
1. HIV and STDs
 2. Vaccines
 3. Hepatitis
 4. Healthcare-Associated Infections
 5. General
- F. Disparities
1. Race/Ethnicity
 2. Language
 3. Special Populations
 4. Gender
 5. Gender/Identity/Orientation
 6. Religion
 7. Age
 8. Senior Issues
 9. General
- G. Barriers
1. Access
 2. Financial
 3. Culture
 4. Communication
 5. Transportation
 6. Insurance
 7. Care
 8. Employment
 9. Disabilities
 10. Research
- H. Barrier/Disparity

1. Education
- I. Additional Services
 1. Community and Bridging Services
 2. Financial Assistance
 3. Policy
 4. Service Expansion and Improvement

Methodology for Deeper Dive (Second Analysis)

A focused set of secondary analyses was completed after the initial identification of key themes and priorities in order to better understand the population needs within broad categories of health and/ or access issues. Three broad categories from the initial analysis were further subdivided:

- Access Barriers —> 15 new categories
For example: For/ due to “fear,” “integrated systems,” or “service availability.”
- Educational Barriers and Disparities —> 21 new categories
For example: For/ due to “health literacy,” “addressing misconceptions,” “caregivers.”
- Promoting Mental Health and Preventing Substance Abuse —> 32 new categories
For example: For/ due to “proper treatment,” “incarcerated populations,” “linked to abuse.”

The following steps were taken to complete the Deeper Dive:

- Exportation of all quotations coded for a broad category in the initial analysis.
- Re-read quotations with attention to identify more specific health needs, barriers, disparities, or special populations at risk.
- Compiled a new list of sub-groups to code quotations for and the keywords that can be used to identify these new codes in the future.
- Applied the new sub-grouped codes to select quotations on an individual basis.

Any quotation from the original broad category that did not fit into a new sub-group was excluded from this analysis. These quotations were acceptable for the initial analysis when the intent was to identify key themes and priorities. In contrast, these quotations were not considered suitable for the secondary analyses because they lacked information to describe the problem, identification of populations at risk, or suggestions of possible remedial interventions. This was a very infrequent occurrence. The below example illustrates when this action was taken:

For example, a participant states, “I see mental health as the most important issue for the community I serve.” This quotation fits well into the initial analysis when the intent was to identify and rank key themes by importance. In contrast, this quotation would not fit well into the secondary analyses because it does not provide any additional information about who is affected, why it is a problem, or what can be done to intervene. A quotation that would very easily be acceptable for the secondary analyses would be, for example, “I see mental health as the most important issue for the community I serve because we have problems with homelessness, people fear discrimination, and it is difficult for them to receive and maintain proper treatment.”

In addition to sub-dividing broad categories from the initial analysis, a new category for quotations was created in order to address “food insecurity.”

The following steps were taken to identify and code quotations for food insecurity:

- Exported all quotations for a set of codes which may have captured food insecurity. This set of quotations consisted of any quotation given a code for 1) access to health foods (a new access barriers sub-group), 2) obesity, or 3) access to safe and healthy environments.
- Re-read quotations with attention to identify any that indicated food insecurity.
- Applied a new code to select quotations identified for food insecurity on an individual basis.

For all new codes created in the secondary analyses, the following data was delivered:

1. Quotation exports
2. Code co-occurrence frequencies
3. Tabular frequencies of quotations according to the county being represented by the speaker

NYS Department of Health Prevention Agenda Areas

The New York State Department of Health Prevention Agenda Areas of Focus shaped the framework for project development and analysis.

1. Chronic Diseases
 - a. Obesity
 - b. Tobacco Use and Secondhand Smoke Exposure
 - c. Preventive Care and Management
2. Healthy and Safe Environment
 - a. Injuries and Violence
 - b. Outdoor Air Quality
 - c. Built Environment
 - d. Water Quality
3. Healthy Women, Infants and Children
 - a. Maternal and Infant Health
 - b. Child Health
 - c. Reproductive Health and Wellness
4. Mental Health and Substance Abuse
 - a. Mental, Emotional and Behavioral Health
 - b. Substance Abuse and Mental, Emotional, and Behavioral Health Disorders
 - c. Integration of Promotion, Prevention, Treatment and Recovery Services
5. HIV, STD, Vaccine Preventable Diseases and Health Care-Associated Infections
 - a. HIV and STDs
 - b. Vaccination Against Vaccine-Preventable Diseases
 - c. Hepatitis C Virus (HCV)
 - d. Healthcare-Associated Infections

For additional information on the NYS Department of Health Prevention Agenda areas, please visit:
https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/

Summary of Findings

Total number of quotations coded applicable to Suffolk County=850

The *Distinct* and *Cumulative* Prevention Areas by ranking tables, displayed below, outline the New York State Prevention Agenda Priority Areas ranked in order from highest to lowest rate of marked significance of concern among participants.

Summit participants reported Chronic Disease as the most significant health problem seen within the communities they serve in Suffolk County. In looking at distinct Prevention Agenda Categories, 30.9% of quotations indicated Chronic Disease being a priority area. Cumulatively 52.1% of quotations in Suffolk were identified as being inclusive of one or more Chronic Disease keyword.

Distinct Prevention Areas by Ranking

Distinct Prevention Areas by Ranking reflects the number of quotations where the focus area is mentioned at least once and counted once, divided by the total number of Suffolk County quotes.

e.g. “Chronic Disease is a problem for the community I serve. Many of our members are troubled with obesity and tobacco use” This quote is coded once for Chronic Disease.

PA Rank	Suffolk	%*
1	Chronic Disease	30.9%
2	Mental Health	29.9%
3	Healthy and Safe Environment	25.4%
4	Healthy Women, Infants and Children	13.2%
5	HIV, STD and Vaccine Preventable Disease and Health Care-Associated Infections	9.4%

* Distinct number of quotations with Suffolk County code and priority area code/total number of quotes applicable to Suffolk County

Cumulative Prevention Areas by Ranking

Cumulative Prevention Areas reflects the number of focus areas mentioned within one of the priority area per quote, divided by the total number of Suffolk County quotes.

e.g. “Chronic Disease is a problem for the community I serve. Many of our members are troubled with obesity and tobacco use” This quote is coded twice for Chronic Disease because obesity and tobacco use are two separate focus areas.

PA Rank	Suffolk	%*
1	Chronic Disease	52.1%
2	Mental Health	47.9%
3	Healthy and Safe Environment	33.8%
4	Healthy Women, Infants and Children	19.5%
5	HIV, STD and Vaccine Preventable Disease and Health Care-Associated Infections	12.7%

* Cumulative number of focus area quotations with Suffolk county code and /total number of quotes applicable to Suffolk County

Prevention Agenda Areas by Focus Area

Within the Priority Area of Chronic Disease, Chronic Disease Management and Obesity/Nutrition were the most frequently prioritized focal areas. Of the total number of quotes by County, 10.2% of quotations included “Chronic Disease Management” and “Obesity/Nutrition” equally, as topics of importance.

Chronic Disease	
Focus Area	%*
Chronic Disease Management	10.2%
Obesity/Nutrition	10.2%
Chronic Disease Prevention	7.9%
Diabetes	5.2%
Cancer	4.0%
Other Chronic Conditions	3.9%
Cardiovascular	3.8%
Respiratory	3.6%
Smoking/Tobacco	3.3%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations
<p>Chronic Disease is a significant health problem for community members in Suffolk County. Prevention and management of chronic conditions should be a priority for those looking to improve quality of live and improve health outcomes. Furthermore, the prevalence of obesity exacerbates chronic disease and mental health problems.</p> <p>Prevention and effective management of Chronic Disease must occur in order to improve quality of life for community members and to reduce the financial burden being placed on our health care system. I can tell you that we have lots of issues, but if we do not get a hold of our chronic diseases, our chronic problems, our heart problems, our COPD, our obesity. -Suffolk Event, RN Nurses Evolve PLLC</p> <p>In Suffolk, I believe that obesity is a huge underlying issue for many chronic medical conditions. The asthma. The high blood pressure. The diabetes. It even can affect mental health with children, with teens. If you have someone who is obese, it affects them socially and emotionally. So addressing obesity is a big issue to affect all the other chronic health conditions that people have. Preventative care, I think if people had more access to preventative care and management, it may reduce the incidents of obesity and reduce some of the other chronic issues. -Suffolk County Department of Health, Maternal Infant Community Health Collaborative</p>
<p>The sale and use of electronic cigarettes and hookahs are trending in youthful populations. This trend has added a challenge to strategies focused on smoking reduction. Smoking rates among those living with mental illness have not subsided and targeted resources will be needed to provide assistance.</p> <p>I am very passionate about helping to advocate, changing laws about tobacco use, and helping people to quit smoking, and we do have many dispar populations. Fortunately for us, the rates are going down, however there are new issues coming up, electronic cigarettes, hookah, and kids are starting to pick up those e-cigs, so whenever we feel like we’ve got something done, it’s like we take two steps back. So I enjoy the challenge of working against the tobacco industry to try to keep on top of it, and to help people who are addicted, mentally ill, substance abuse, very high rates of smoking, they are not getting the help that they need, so advocating for them for more resources to be able to quit smoking is very important. -American Lung Association</p>
<p>Education focused on healthy eating, chronic disease management or physical activity must be culturally competent and of health literate standards to properly engage the diverse spectrum of community members living in Suffolk County.</p>

Nutrition related diseases, whether it be high blood pressure, diabetes, these are things, even just educating people how to, when they're receiving SNAP, what type of items to buy. Cultural diversity, just having, you know, staff in each facility trained on just the cultural needs of different populations. I see a lot of -- there's a big gap sometimes when someone comes in and speaks another language, and how do you help that person that speaks another language and, like you said, may not be able to even read or write in their own language, so I think a lot of it is just having staff that's educated and more well-rounded to provide those type of service to people that need that direction.

-Long Island Cares

Many cases of COPD and lung cancer are not diagnosed until the condition has progressed into its later stages. Awareness and education surrounding the importance of screenings, for any chronic condition, leads to early diagnosis and thus more effective treatment.

Challenges that we see are people who have been smokers for many years. COPD in particular, probably half the cases that are out there, have not been diagnosed yet. People just feel that oh im a little older, Im a little short of breath, until acute exacerbation and they end up in the hospital with pneumonia and then they are diagnosed. Very similarly, lung cancer, there are no early warning signs for lung cancer. Because women just don't think about it. So we are trying to get them to understand that if you are at risk, get screened. Early screening is very important. We know that lung cancer has huge fatality rates; it's the number one cancer killer in the US for both men and women. Because there is no early warning signs and no screening. So we are really starting to build the push on educating the community about early warning signs, getting screenings for both.

-American Lung Association

The Priority Area of Mental Health and Substance Abuse emerged closely as a second-ranking topic of importance. Qualitative analysis demonstrated, 29.9% of quotations indicating Mental Health as an area of concern in Suffolk County. Cumulatively, 47.9% of quotations included Mental Health and Substance Abuse as an area of concern within communities served in Suffolk County.

Upon further breakdown of the focus areas within the overarching priority area of Mental Health and Substance Abuse, "Mental Health Issues", including behavioral, developmental, poor mental health, emerged at the forefront with 18.1% of quotations in Suffolk County. A second focus area, "substance abuse", appeared with 11.3% of quotations containing related key words.

Due to the complexity of Mental Health and Substance Abuse as a focus area, the analysis team saw potential benefit within a second round of analysis, covering all aspects of mental health and substance abuse at a granular level. This second analysis is described within the *Deeper Dive* section V of this report.

Mental Health and Substance Abuse	
Focus Area	%*
Mental Health Issues	18.1%
Substance Abuse	11.3%
Susceptible Populations	7.4%
Attitudes	4.1%
Anxiety, Mood Disorders, and Associated Emotions	2.9%
Treatment and Recovery	2.7%
Eating Disorders	0.9%
Suicide	0.4%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations

Availability of mental health and substance abuse treatment and recovery services is not adequate considering the high demand for service. Prevention and strategies focused on maintaining follow-up care for mental health are equally important.

. . . The major issue is the long waiting list and by the time that their appointment comes up they're no longer with us and they fall through the cracks. We don't know where they're going. We don't know if someone is going to follow up so that's part of, you know that lack of prevention as well. It's a long waiting list just to get psych evaluations.

- *Community Housing Innovations*

Mental health problems for seniors are often undiagnosed which leads to an inability to provide effective treatments or therapies.

When you first mentioned the question about the major health problems, I work in independent housing for seniors, and there are a lot of undiagnosed mental health issues. So they have the mental health, but it's never been diagnosed, and getting the services and the treatment and even medications for that generation becomes very hard.

- *Catholic Charities Housing Department*

Substance abuse is a notable problem throughout the Long Island Region. Substance abuse is often recognized within diverse populations including young adults, seniors and Veterans.

Talking about specific health concerns, so one of the things we're really looking at the specific health concerns. I think the number on Long Island is over 300 young people are dying a year from heroin overdose. So that's the equivalent of a jumbo jet liner crashing and everybody dying, once a year on Long Island. So if that were to happen, we would be outraged. There would be more of a policy outrage, of why is this happening? So my boss is actually a priest, and he buries a lot of these young people who die every year, so that's really a major push for us. It's criminal. We're not talking about the traditional, you smoke pot, and you move onto a higher drug, a different drug, we're talking prescription medication to heroin overdose to death, within a couple of years. So that's one of the main focuses we're working on.

-*Hope House*

One of the things, it's a hidden secret is the substance abuse among seniors, you know due to the isolation, but also too there's a lot of seniors that are sitting at home drinking all day and so it is not just a young person or, you know, a middle adult issue, it's a very big issue for seniors.

- *At Home Designs*

The relationship between chronic disease and mental health presents care providers with complex challenges related to the interplay between conditions and medication regimen.

Mental issues and substance abuse issues, but what comes with that sometimes is obesity, diabetes, high blood pressure. Often times it's the medications that are prescribed. Proceedings and that people take actually can cause diabetes and cause people to increase their appetite, and that's the domino effect. Those are many of the health issues. Obviously, for the older population, chronic heart disease, COPD.

-*Association for Mental Health and Wellness*

Additional interpretation located within "Deeper Dive" Section of this report.

Healthy and Safe Environments were discussed as an area of concern within 25.4% of Suffolk County quotations. Cumulatively, 33.8% of quotations from Suffolk County included aspects of Healthy and Safe Environment.

Within this area, "Homes" were reflected in 11.2% of quotations with "Access to care" following in second with 8.2% of quotations. The focus area of "homes" covered issues related to safe and affordable housing and tobacco-free housing.

The “Access” focus area included key words and themes such as access to care; food; service; school and stores. After further exploration of the code “Access”, the analysis team sought further investigation of this area within a second round of analysis, which is described within the Deeper Dive section V of this report.

Healthy and Safe Environment	
Focus Area	%*
Homes	11.2%
Access	8.2%
Violence	6.1%
Injuries	3.4%
Built	2.6%
Air Quality	1.4%
Water	0.8%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations
<p>The lack of affordable housing in Suffolk County creates unsafe living environments, which can be considerably problematic for seniors and veterans. Availability of stable housing has a direct correlation with barriers to accessing health services.</p> <p>Just to speak about the chronic homeless population, which is a lot of people out there, there are veterans out there, there are a lot of people freezing to death on Long Island, which is insane that that's still happening. To that piece, and it's connected to health, is definitely affordable housing. or you have landlords who are buying houses who are literally renting to 20 people in a ranch house, that's made for three, four, maybe five people.</p> <p><i>-Hope House</i></p>
<p>A sustainable, built environment provides increased opportunity for community members to engage in physical activity and promotes easy access to health services and healthy food options.</p> <p>I'd say leading a healthy lifestyle, so whether that's access to healthier food options and beverage options. A lot of the communities that we work in may not have a grocery store nearby or they'll have corner stores and if you then look at the percentage of the population that doesn't own a vehicle, you have to think about these families that now have to walk, like, how far do they have to walk to get healthy food for their families and if the closest thing that they can access is some type corner store, you know, that tends to have high caloric foods that are nutrient deficient, then also you have communities that maybe aren't necessarily walk friendly, you know, you went to increase these opportunities for physical activity in getting families and kids outside.</p> <p><i>-Sustainable Long Island</i></p> <p>One thing I wanted to address for all of these things too is the nutrition part of it, but also on the other end of that is the movement and the exercise and the recreational opportunities that need to be stressed. There is not one chronic disease that isn't helped by some sort of exercise, and unfortunately, especially out in Suffolk County, a lot of our communities are not walkable, there are no sidewalks, but even there are no bike paths, there is no -- not no, there is few bike path, and the different places where people can do inexpensive activities. Not everybody can afford to join a gym, not everybody can or has the access to that kind of program, but I think the schools need to really concentrate on lifetime activities, what the children are learning that can carry through for a lifetime in their gym classes, in their programs that they're offered, and the towns themselves with coming up with recreation and activities for the community.</p>

-At Home Designs

A safe home environment is incredibly important for seniors who may be susceptible to falls and injuries due to their medication regimen.

I just want to put for the record one thing about the falls and the senior citizens, because there are a lot of seniors who, because some of the medications, they are not taking it properly or they are overmedicated or they don't realize they have hazards in their home. So we see a lot of folks, seniors, who don't want to admit they are not as steady as they used to be, so they are falling.

-Stony Brook Medicine

Domestic violence persists in select Suffolk County neighborhoods which is an overall environmental safety concern contributing to an increase in at-home injuries.

Forms of Elder Abuse including physical, emotional and financial yield to unsafe and dangerous home-environments for seniors.

Looking at injuries and violence I think really especially when you're looking at it from a public health perspective, domestic violence and sexual assault are definitely public health concerns because it may be affecting one person we see that, you know, people are missing work. We're seeing a tremendous increase in traumatic brain injuries or violence issues. And also looking at things, we see a lot of elder cases so it may not be physical abuse, but financial exploitation, emotional abuse. People you know mismatching medications, refusing to give medications particularly when their caregivers are overmedicating people that they're taking care of.

-VIBS

Community members of lower socio-economic status often experience barriers to accessing high quality health care and poorer health outcomes. Significant health disparities and poor outcomes related to asthma are seen in Hispanic and African American populations.

We know that in populations of poverty, we see many more hospitalizations and emergency room visits for asthma. But African Americans are five times more likely to die from asthma than Caucasian. Hispanic are three to five times more likely to end up in the hospital than white children. So from -- it is sometimes related to genetics, but mostly to lower socioeconomic status and lack of -- barrier -- lack of access to good healthcare in their communities. It is also very closely related to the housing situation.

- Asthma Coalition of Long Island/American Lung Association of the Northeast

Lack of affordable housing and transportation in low socio-economic neighborhoods contribute to a barrier accessing community services or supermarkets which carry nutritious food choices.

I just wanted to add that housing and transportation are two of the biggest issues for our members. The lack of Section 8 housing, safe and affordable housing. Our members don't have extra cash to pay for realtor fees for an apartment, security deposit, moving expenses, transportation. Not everybody has a car. If you travel by bus in Suffolk County, it can take you three hours to go a couple of miles. So transportation is a very, very big issue. We have supermarkets that are closing left and right predominantly in lower income communities. So you go to your local, little store, they're not carrying healthy foods.

-Association for Mental Health and Wellness

Additional interpretation of "Access to services" located within "Deeper Dive", section V.

The priority area of Healthy Women, Infants and Children was highlighted as a focus area of concern within 13.2% of Suffolk County quotations. Cumulatively, 19.5% of quotations from Suffolk County included aspects of Healthy Women, Infants and Children.

Within this area, “Children’s Health” was reflected in 9.3% of quotations with “Maternity/Mother” following with 5.8% of quotations. Children’s health issues were inclusive of keywords related to well child visits; child neglect; safe childcare options; developmental delays and dental problems for children.

The focus area “Maternity/Mother” covers issues related to breastfeeding; health insurance for mothers; reproductive care; young mothers and utilization of preventive health services for mothers.

Healthy Women, Infants and Children	
Focus Area	%*
Children’s Health	9.3%
Maternity/Mother	5.8%
Pregnancy	2.4%
Infant’s Health	1.5%
Childbirth	0.6%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations
<p>The availability of childcare services is not adequate in Suffolk County. Due to this gap, mothers face challenges with accessing social, health or education services.</p> <p>And the other is that the mothers don't have adequate child care. We expect in this society that women should be working, and they have to work to make a living, but there is not adequate child care. All the services and all the programs are very good, we provide them, but it doesn't link to the people who really need it. So that's why we see so few of them attending those services. <i>-Cornell Cooperative Extension</i></p>
<p>Incidence of infant mortality, prematurity and low-birth rate babies is higher among the African American population. It is vital that expectant mothers, especially those in high-risk populations, are accessing comprehensive health services. Post-delivery is the perfect time to engage mothers in follow-up care by linking them to services.</p> <p>When it comes to birth outcomes, there is still a very high incidence of infant mortality, pre-term weight, mostly for the African American population. Even before that woman becomes pregnant, What is being done in the preconception period; What is the health of that mother like; Does she have chronic disease; Is that chronic disease being managed; Is she going every year for routine OB-GYN care; Is she being screened for HIV? Because the health of that woman before the pregnancy even occurs can impact on that outcome, preconception, prenatal and what we call the intra-conception phase. After she has that baby, before that next pregnancy we want to make sure she gets linked to services. <i>-Planned Parenthood, Nassau County Event, Region Specific</i></p>
<p>Nutrition education should begin in the school setting and extend into the home environment. Parents and caregivers are the key to sustaining healthy eating practices outside of the school setting.</p> <p>Nutrition, starting at school-age level. Fundraising. They do fundraising with chocolates, McDonald's fundraising. We need nutrition workshops, not just for the children at the school-age level. We somehow need to get the parents involved. It's much easier to go to McDonald's and have dinner in a snap. We all like our junk foods once in a while, but it tends to be an everyday affair. <i>-Brentwood/Bay Shore Breast Cancer Coalition</i></p>

HIV, STD, Vaccine Preventable Diseases and Health Care-Associated Infections comprised 9.4% of distinct and 12.7% of cumulative Suffolk County quotes. Although this area comprised the least significant majority of quotations, interpretative analysis provides strong evidence that there is a desperate need for

additional services reaching those living with HIV/AIDS. This population requires a unique set of integrated care services, which seems to be lacking in accessibility. Furthermore, there are new emerging disease trends that will be important for professionals to address moving forward.

HIV, STD, Vaccine Preventable Diseases and Health Care-Associated Infections	
Focus Area	%*
HIV-AIDS	7.5%
Sexually Transmitted Disease	3.1%
Vaccines	0.8%
Hepatitis	0.7%
General Infections	0.4%
Associated-Infections	0.2%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations
<p>Stigma and cultural views create barriers to providing testing, education or care to those living with HIV/AIDS.</p> <p>New York State law now requires primary care providers to offer HIV testing services to patients; however there are gaps in proper utilization or awareness of this guideline.</p> <p>What I'm most excited about is we have the tools and resources to end the HIV/AIDS epidemic. It's a matter of getting everyone aware of their status and maintaining their care for the end of the viral spread. It's meant to keep the disease virally suppressed so they maintain their health and don't transmit the disease. The stigma though still exists and it prevents people from getting tested and people from getting treatment. I work with a lot of clients who are diagnosed late, and at that point HIV has progressed to AIDS. There are complications that aren't necessary if there is primary care in the first place. It is New York State law that doctors have to offer the test for AIDS, but people do not know that, and some doctors do not offer the test. But I'm excited that we have the tools to end the epidemic. <i>-Thursday's Child</i></p>
<p>Care for people living with HIV has progressed to the point where we now need to focus on the provision of well-rounded, comprehensive care, which may include a focus on cases of HIV coupled with chronic diseases. Mental health and substance abuse are issues commonly associated with those living with HIV or AIDS.</p> <p>So we know that HIV is now a manageable disease. A person can take medication and pretty much live a healthy life, as somebody who doesn't have it. One of the things that have really affected the linkage and adherence to treatment has been mental health and substance abuse. So that's why this program came, to really address to work with the person, and provide them that individual education and figure out why they aren't accessing. Do they know what addiction means? What stigma is associated with mental health and substance abuse? So these are all main topics that I would meet with them individually to really figure out, is it culturally, if somebody in their family thinks, if you go to mental health you're crazy. They're not going to access those services. So it's really the education piece is very crucial to help them understand that importance and eventually linking with them, so that it could in turn help them in other parts of their life like their HIV, and be able to manage it and live an overall healthy live. <i>-Stony Brook Medicine EPIC</i></p>

Theories supporting anti-vaccination are popularizing, which has led to children being unvaccinated. Programs providing evidence-based information and education on the effectiveness and benefit of vaccinations may be helpful to address this.

I know some with regarding to the HIV STD and vaccine preventable diseases are the anti-vaccers. Social media has exacerbated these days you know, there's a huge one side or the other side, totally opposite. And people tend to believe those little things that they see, and they don't even see where they came from or what the source is. And it does not matter, and it's really hard to change people's mind, but it is a huge issue because kids are not getting vaccinated, and we are going to start to see more and more of these flare ups of childhood diseases that have been eradicated, or close to that should have been. So it is an issue.

-PSEG Long Island REAP Program

Disparities, Barriers, Education & Additional Services

Disparities among the senior population were of high importance to summit participants with 18.4% of quotations in Suffolk County being coded under this topic. The focus area of "Senior Issues" included key words related to aging, alzheimer's, finances, abuse, cognitive loss, crisis, falls, housing and safety. One theme of particular relevance was a resource need for caregivers who are often times unprepared for the decision-making and financial responsibility associated with caring for a family member.

Disparities related to "age" were indicated within 8.1% of the total Suffolk County quotations.

Disparities	
Focus Area	%*
Senior Issues	18.4%
Age Disparities	8.1%
Race/Ethnicity Disparities	7.8%
Language Disparities	7.4%
Special Population Disparities	6.8%
Gender-Identity-Orientation Disparities	3.1%
Gender Disparities	2.7%
General Disparities	1.1%
Religion Disparities	1.1%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations

Many caregivers are unprepared for and faced with financial challenges that come hand in hand with the responsibilities of providing for and managing daily life for a family member.

Many of the services or support programs for people caring for someone with Alzheimer's or dementia take place at home, home care, which we try to educate the general public about and that calls for financial planning. The medical part of it may be covered, going to the neurologist or ongoing medical treatment, but to get someone to come into the home to help out often is private pay. So, that's a very big financial aspect. So, people that kind of fall in the middle -- you know, there's Medicaid, of course, there is a community Medicaid, but people who are in the middle, not very, very wealthy, it's a big financial burden on the family. So, if the person who has been diagnosed is the main breadwinner and the family cannot get assistance, that's a big issue.

-Alzheimer's Association

To everybody's point regarding the ageing population there's nearly one million caregivers on Long Island

and in order to be preventive in many situations we have to get information to those caregivers. And many of those caregivers don't identify themselves as one. So it's that population as well that we have to educate and give resources to not only for those that they maybe caring for, but as preventative information for themselves.

-Utopia Homecare

The LGBT community in Suffolk County is one that is medically underserved with many who have unmet health needs. To access services, many LGBT community members travel to New York City.

The LGBT community, in my opinion as a professional, I think they are underserved. That impacts their access to care and the level of care that they're getting and the services that they are providing. I know a lot of trans people on Long Island who commute to New York City for health care. So as a region, we're not serving their population. It's a population that needs more help. I can tell you there are thousands of trans people on Long Island who need services. The health issue I deal with specifically impacts this community more so than others.

-Thursday's Child

There are compounding barriers to accessing care that can be seen within the large population of undocumented individuals in Suffolk County. Such barriers include: lack of insurance coverage; financial barriers to paying for care; cultural and language barriers; not understanding of how to navigate the health system; transportation barriers and beyond.

Along with all the cultural and financial barriers and expectations, you also have a large undocumented population. So they don't have access to the same kind of medical care or other services that might enable them to go for medical care like transportation, like some government subsidies, and things like that. So the undocumented population is huge on Long Island and they don't have coverage and they don't have the resources.

-Adelphi University

As the age of the baby boomer population advances, expanded health services and financial resources will be needed to support this population. An added challenge may be seen for families who are experiencing poverty or financial debt into retirement age.

I wanted to add to her comment which another challenge again is Suffolk and Nassau County. If you look at the population demographics of Suffolk and Nassau for people who are under the age of five it's slightly increased. People, who are K to 12, flat because those families are leaving. It's the baby boomers that are shooting up in the last 12 years. The senior population has increased close to 33 percent and we're not really prepared for that at all. We're not prepared with our programs; we're not prepared with accessibility. Prepare for that increase in population so that's another challenge.

-Suffolk County Department of Health, Division of Prevention Medicine

There are extreme challenges associated with linking vulnerable populations, particularly the undocumented community to the services they need.

I actually wanted to comment about the LGBT community, but certainly we're seeing racial minorities and there is higher prevalence in those communities and historically less access to care. Particularly with the undocumented community we faced a lot of challenges to link diagnosis of HIV positive individuals to care. A lot of it leads to housing. A lot of folks aren't getting emergency housing opportunities or even SafeLink, the cell phones, those government cell phones, that's really difficult when you don't have the means to call up and make an appointment. So definitely among the undocumented population and I feel among Hispanic gay men and black gay men, because there is an additional stigma.

-Thursday's Child

Because community members seek treatment they are comfortable with, to increase service utilization among ethnically diverse populations, it is imperative that the availability of health literate and culturally competent services is increased.

People tend to seek out doctors or health care providers that speak their language or even of their own

ethnicity. There is a certain comfort to them there, you know, even if that might not be where they should be going or where they need to go, but they kind of stick to what they're comfortable with.
-Adelante of Suffolk County

Barriers to care were discussed frequently during the summit event, with a majority of conversation surrounding this topic. The top-three emerging focus areas included: “access barriers” and “financial and “care barriers”.

19.9% of barrier quotations in Suffolk County were related to “access” barriers. “Access barriers” included themes related to access to care; housing and transportation. Because “Access barriers” emerged as a leading focus area, the Analysis team had specific questions and considerations related to what “Access” really referred to. Within the “Deeper Dive” section V, this theme will be further broken down into sub-groupings.

“Financial barriers” were another frequently discussed barrier to care. Keywords associated with financial barriers include: affordability, barriers to funding, financial burdens, pay scales and poverty. Of the Suffolk County quotations flagged with barriers to care, “Financial Barriers” comprised 16.1%.

“Care barriers” comprised 13.4% of the total Suffolk County Barriers quotations. “Care barriers” include keywords related to: continuity of care, preventative care, service, staffing, medication, office hours and technology.

Barriers to Care	
Focus Area	%*
Access Barriers	19.9%
Financial Barriers	16.1%
Care Barriers	13.4%
Insurance Barriers	12.1%
Transportation Barriers	9.3%
Cultural Barriers	6.1%
Communication Barriers	5.5%
Disability Barriers	4.9%
Employment Barriers	3.2%
Research Barriers	0.6%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations
<p>Lack of financial security and stability are directly connected with a person’s ability to take accountability for their health needs, making decisions related to health statuses even more challenging.</p> <p>Lack of financial security is a significant barrier for the senior population, often contributing to an inability to access health services.</p> <p>If you lack financial means, you have a very difficult time finding a provider paying for your medications. Even if you are insured, you may have a difficult time paying co-pays, deductibles. The new plans that are out there, oftentimes, have very high deductibles and co-pays, and there are some help with the premiums, but they can still be out of reach for many people to access. Medicaid recipients have very good coverage in some ways, but it can be also difficult to find good providers under Medicaid. So</p>

finances are a big issue.

- *Suffolk County Department of Health, Maternal Infant Community Health Collaborative*

There's just lack of financial security with our seniors. Really the numbers are staggering and dumbfounding. I can't even begin to tell you. You know, we go into some of these homes and like I said their income is \$900 per month. You know, and so then they don't even know about Medicaid. So then it's a whole process of getting the Medicaid because they need services, and they are in debt now, because they didn't even realize they were entitled to Medicaid, and even people who have some money, who own the home, do not realize that they have access to these, to Medicaid, and to other avenues for financial relief. It definitely, the financial end of it, is a problem amongst our seniors.

-*Federation of Organizations*

Prioritization of needs for a family or caregiver is often based upon perceived urgency or necessity which often leaves preventative care and routine well visits to the wayside.

You look at people who are impoverished; they take care of their most drastic needs first. They need air, food, shelter. If there is no money left over after those three things, the other things get thrown to the wayside. You know, you get by without adequate clothing. You get by without preventative home care. Get by without going to a doctor, not just for preventive care, but when you are sick. If the kids are hungry, or if you are being threatened with eviction, the thing that drops off is taking care of your health, because that is not an urgent thing.

-*Catholic Home Care, Good Shepherd Hospice, Nassau event, Region specific*

The undocumented population is often left underserved due to misconceptions, mistrust or fear regarding their citizenship status. Community outreach focused on establishing trust, and culturally appropriate education focused on how to access services is an effective way to combat this fear.

You can let people know, you don't have to be afraid to go to the doctor if you are undocumented. You don't have to be afraid to call for help if you are undocumented. Here are ways that you can improve your health. This is what's going on mental health wise, and here is what you can do about it. I think that's important. I think I might have missed my chance before, but I just have to get this in there. We really need to fund care for people who are uninsured and ineligible for insurance. We need mental health sources for people. We need substance abuse treatment for all people. Medical care for all people. So it doesn't matter what your immigration status is or economics are. It is out there for everybody that needs it. We are one village. We are one community. What affects the undocumented people that live over here affects everybody. So that's I think we need to, you know, address getting - some funding and some services in place that's really important.

- *Suffolk County Department of Health, Maternal Infant Community Health Collaborative*

Stigma associated with individuals living with HIV, AIDS or those who identify as LGBTQ, has impacted the quality of care accessible to such vulnerable populations. Arming providers and front-line workers with the education needed to appropriately communicate with this population will improve gaps in service care.

I think the biggest barriers are stigma, both real and believed. We need competent providers across Long Island, and we might have points here and there, but it's a long island. I'm talking about all the different aspects of our culture that make us multi-dimensional; language, identity, LGBT, sexual identity, our HIV status. And I think it has to start with how we, as providers, do our intakes, ask our initial questions, because that person at the front desk who welcomes you, how they address you, how they speak to you, makes all the difference if that person will come back to you. Who's at the front desk? It has to be culturally relevant; otherwise we're never going to get past the perceived lack of competency.

-*LGBT Network*

Increased availability of health literate and culturally competent services, especially for minority populations, is an important component of improving health status. Establishing trust and demonstrating respect sets the groundwork for continuity of care.

I wanted to add two things that are barriers - trust, especially for the minority populations, where you provide the service and if they're coming is that they trust that organization. They may not trust you, but if they trust that organization they will come and seek that service, so the barrier is the trust you develop. And the cultural sensitivity who is the educator, who is the in-between person, who is providing that information or that service, is sensitive, is respectful, has the empathy, all those qualities that we probably seek out and we get burnt out, or we have people on front line and it's very hard to continue to do, so that becomes a barrier eventually, to provide the good sense, the services that we intend to do.

-Cornell Cooperative Extension

A disconnect between availability of health insurance and ensuring coverage is problematic among undocumented community members in Suffolk County. Vulnerable populations are often unaware of the health coverage plans available to them.

And that brings up the issue of health insurance which definitely affects the Brentwood/Bay Shore community because we have many undocumented individuals. We have to fight for them to get health insurance.

-Brentwood/Bay Shore Breast Cancer Coalition

Educational Disparities and Barriers, is another topic that the Data Analysis group felt should be further explored, with 19.6.0% of Suffolk County quotations. Themes related to educational disparities and barriers are broken down by sub-group within section V, A Deeper Dive.

Educational Disparities and Barriers	
Focus Area	%*
Educational Disparities and Barriers	19.6%

*** Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County**

After participants were asked to identify the most significant problems, barriers and disparities for the community they serve, participants were led to share their innovative ideas as to what additional services and programs are needed to improve the health of Suffolk County residents. Response to this question yielded very interesting results and many suggestions were closely related in concept.

Suggestions were broken down into four themes: service expansion and improvement; community and bridging services; policy and financial assistance.

“Service expansion and improvement” was the most frequently mentioned concept, with 16.7% of Suffolk County quotations addressing this topic. Suggestions for service expansion and improvement included ideas related to: extended provider service hours; additional screenings; screening for social determinants of health; culturally competent and linguistically appropriate services; workforce training for professionals and additional community health workers.

“Community and bridging of services” was a second commonly suggested theme including ideas related to: hiring health leads, empowering community members, health fairs, developing resource centers, bridging gaps in care, networking, establishing partnerships, family-centered advocacy and working with

faith-based organizations. "Community and bridging of services" was mentioned within 12.9% of the total Additional Service flagged Suffolk County Quotations.

Additional Services	
Focus Area	%*
Service Expansion and Improvement	16.7%
Community and Bridging Services	12.9%
Policy	5.5%
Financial Assistance	3.8%

* Number of quotations with Suffolk county code and focus area code/total number of quotes applicable to Suffolk County

Analytic Interpretation & Participant Quotations

To deliver effective services, it is absolutely critical that providers and community-based organizations are providing education and services that are adherent to Culturally and Linguistically Appropriate Standards of care. All service providers, including physicians and front-line staff members should be participating in trainings which address cultural competency, health literacy and unconscious bias.

I just -- a couple of people mentioned this. I do think it is important to reach people in their communities through people from their communities. So there are people that are like them. People that have the same experiences. That speaks their language. That will disseminate real accurate information. Can dispel some fears. Can educate. You can let people know, you don't have to be afraid to go to the doctor if you are undocumented. You don't have to be afraid to call for help if you are undocumented. Here are ways that you can improve your health. This is what's going on mental health wise, and here is what you can do about it. I think that's important. I think I might have missed my chance before, but I just have to get this in there. We really need to fund care for people who are uninsured and ineligible for insurance. We need mental health sources for people. We need substance abuse treatment for all people. Medical care for all people. So it doesn't matter what your immigration status is or economics are. It is out there for everybody that needs it. We are one village. We are one community. What affects the undocumented people that live over here affects everybody. So that's I think we need to, you know, address getting some funding and some services in place that's really important.

- Suffolk County Department of Health, Maternal Infant Community Health Collaborative

Collaborative partnerships and community-wide communication efforts are essential in being able to assist community members in reaching the services they truly need.

So I think that the awareness is for every level about all kinds of things because it's going to affect everybody differently. But the awareness and people say "Oh, it's on the database, I don't think it works." Because then nobody knows about the database and then everybody forgets to talk to each other and tell them what's out there. And I think awareness is the primary thing. Are we all always going to be on top of everything? No, but I think it's these kinds of things, these kinds of get-togethers, these kinds of networking on a regular basis, actually give people an opportunity to talk. Not just network, not just wander around the room, and perhaps walk into someone, but to actually collaborate and find out information about other places is what people really need on a health care level to find out what's happening.

-Suffolk Cooperative Library System

I think one of the things that we have heard a lot today is that there are opportunities and services out there, but how can we collaborate, how can we connect people and connect different programs that are doing the same thing and how can we work together. I think that is a big problem in health care across the board for services.

-Sustainable Long Island

Provision of system navigation efforts may be an effective way to both empower patients, and to achieve desirable patient outcomes. Many patients do not know where to start, or how to access health or social services. An in person guide may supplementary for those who are looking to take the first step, to avoid being lost within the complexity of system navigation.

And then, I would say even like a single point of entry to human services, to me, would be the ideal, regardless of whether I have a physical disability, or maybe I need help because I am an aging senior, or I need help because I have a child who has a substance abuse problem. Almost as if there was one central door to go through that somebody could then be an advocate for me, and help steer me to the right resources.

-Developmental Disabilities Institute

Community champions may be useful in identifying areas of synergy and introducing partnerships among organization to address some of the barriers linked with connecting people to services.

One of the things that would really help improve the services is the idea of having like community committees, having community leaders, community champions, a place for all of these people to convene together so you can figure out where services are overlapping and how you can connect your constituents with other services that they might need because you can do these programs, revamping corner stores or improving the built environment, but there are still all these other issues lie transportation and lack of education, so I think it's really essential, I know the Wyandanch Leadership Committee, they have that, that's been around for a little while. I think it's really essential that those things start popping up on Long Island and it's important for these leaders to be active in all these different agencies to be involved so we can connect people to what they need.

-Sustainable Long Island

Taking a Deeper Dive

Barriers to Accessing Care

A secondary analysis of “Access Barriers” was taken to better understand the key themes of significance. Identification of sub-groupings was completed by carefully reading each quotation flagged under this code and identifying the sub-groups as emerged throughout the transcription. Based upon this identification, Access barriers were divided into 15 new sub-groups as identified within the table below.

Of the total “Access Barrier” quotations in Suffolk County, “Transportation” emerged at the forefront with 26.8% of the total Suffolk County barrier-flagged quotations. “Transportation” included discussion of: inadequate public transportation services or community members who do not have access to private transportation/cars.

“Understanding and Awareness” comprised 26.2% of the Suffolk County Access Barrier quotations. This sub-group refers to: community members being unaware of services or how to obtain services; people not seeing the purpose in obtaining care and stigma surrounding requesting particular services.

“Systems” was the third barrier with highest significant to accessing care, fulfilling 26.2% of the total Suffolk County Access barrier quotations. “System” barriers include: integrated care models, system complexities, paperwork, applications, and provision of patient centered care.

Barriers to Accessing Care	
Sub-Group	%
Transportation	26.8%
Understanding and Awareness	26.2%
Systems	26.2%
Lack of Support	25.0%
Service Availability	24.4%
Financial	19.5%
Insurance	16.5%
Housing	16.5%
Literacy	10.4%
Disabilities	7.3%
Culture/Religion	5.5%
Access to Healthy Foods	4.3%
Policy	3.0%
Fear	1.8%
Integrated Systems	0.0%

*Number of Quotations with County Code and *subgroup divided by number of quotations in parent group Barriers to Care.

Analytic Interpretation & Participant Quotations
<p>Convenience and lack of adequate transportation services are deterrents for community members in accessing care, particularly for those who require preventive screenings or follow-up health services.</p> <p>Transportation is a monumental challenge throughout Suffolk County, extending to communities on the eastern most region of Long island.</p> <p>With us, I know transportation is a big thing. We deal with a lot of the east end. For Montauk there is no transportation for them. We partner with providers all over Suffolk County and partner with Hudson River Healthcare, so they can go to their local health center and be able to be screened, and we try to make it as easy as possible, and we offer transportation to mammography or doctor's appointments. That's one of the biggest things that we see. <i>-Suffolk Cancer Department of Health, Cancer Services Program</i></p> <p>Transportation, I think it would be helpful. They are putting in more barriers to limited access to transportation rather than open it up. All the research shows if you are accessing your care after the year appointments or going to the doctor that you are going to utilize fewer resources. It is better for your patients, but they are putting barriers in place where you can't access them. If you can't get an ambulance, have the person use the ambulance. We want the people to follow up. We want them to be healthy, but by limiting what they can use, we are limiting their ability to follow up. <i>-John T. Mather Memorial Hospital</i></p> <p>To promote available resources, Development of a centralized hub or library resource center for accessing information about health services, resources, accessing assistance for social determinants such as housing, heat/electric; etc. in order to support patient navigation and empowerment.</p> <p>Maybe if there was an Island wide push towards something central where this is where you can go to get information to help you, it's free, non -- whatever it is, you know, to access that information for services or</p>

a place where you can meet people in person in your community where it is easily accessible, you know. That's one of the issues in terms of transportation. But maybe a central place in each community, or through the phone, again where it's easier to pick up the phone -- of course, if you have a phone, but you know, I think making it as accessible to -- there are such great resources that a lot of us don't know about on the Island. Having that ability to access them.

-Girls Inc.

There are compounding barriers to accessing care for those who do not know how to navigate the system in Suffolk County. Such barriers include: lack of affordable housing, transportation, additional bilingual care services and an increase in mental health services.

I'm going to say, from what I have heard, people don't know about those. So how are they accessing those services; or are they not accessing the services; and what other resources do you feel are needed? We have already said more housing; better transportation; more bilingual providers; more psychosocial programs; more access to mental health providers; more transportation out in Suffolk County. That's a big barrier.

-Pilgrim Psychiatric Center

Food Insecurity

In exploring “access barriers”, specifically with healthy food choices in mind, the analysis team chose to investigate linkages between financial barriers and accessing healthy food options. Many families living in poverty or of low socio-economic status are forced to prioritize personal need based upon the amount of money they have in their pocket. There are many resources available for families including: group classes, food pantries or government subsidies, which would support healthy eating and healthy meal decision making. Bridging families who are vulnerable to these resources should be a top priority in decreasing food insecurity.

Analytic Interpretation & Participant Quotations

Food insecurity among families of low socio-economic status is a growing concern in Suffolk County. Although healthy food options may be accessible, financial strain forces decision makers to prioritize needs.

As part of Feeding America, we take part in a national survey called the Hunger Study. We go out and we talk to the community itself. We ask them very detailed questions. The result of the Hunger Study always show that people choose not to eat properly so that they can pay the rent or have transportation or get medicine or see a doctor. So if they have to make a choice, they will chose to go without a meal or not eat properly or go to McDonald's and split a hamburger up and give it to the kids so that they have something in their stomachs. We always say that it's a choice, but if the other issues were taken care of properly, then hunger would not be an issue either.

-Adelphi University, School of Health Studies, Nassau County Event-specific to region

I want to talk about food insecurity. On Long Island people don't think that Long Island has an issue, but they do. Because families on a fixed income very often can't afford food at the end of the month and they are making decisions about whether they want to pay for transportation to a doctor or copays for their medical prescription or get food to eat. A lot of seniors are on SNAP benefits, food stamps. Also they use the local community food pantry to supplement their food.

-Family and Children's Association, Nassau County Event- specific to region

Educational Barriers and Disparities

A secondary analysis of Educational Barriers and Disparities was taken to better understand the key themes of significance layered within this topic. Identification of sub-groupings was completed by carefully reading each quotation and identifying the sub-groups as discussed within the transcription. Educational barriers and disparities were divided into 21 new sub-groups as identified within the table below.

Of the total “Education Barrier” quotations in Suffolk County, “Patient Engagement” emerged at the forefront with 35.7% of the total quotations. “Patient Engagement” included discussion of: decision making, healthy lifestyles, patient activation measures, empowerment and self-management skills.

“System navigation” comprised 20.1% of the Suffolk County Education Barrier quotations. This sub-group refers to: building trust, respect, helping with paperwork, accessing services, and connecting dots.

“Health literacy” was the third most significant education barrier, fulfilling 16.9% of the total Suffolk County Access barrier quotations. Health literacy barriers include cultural competency, language and effective communication.

Education	
Sub-group	%
Patient Engagement	35.7%
System Navigation	20.1%
Health Literacy	16.9%
Caregivers	13.6%
Workforce	13.0%
Central Information Hub	11.7%
Nutrition	11.7%
Addressing Misconceptions	10.4%
Drugs and Alcohol	9.1%
Mental Health / Depression	9.1%
HIV/AIDS and STDs	7.8%
Prenatal Care	7.1%
Screenings	5.2%
Schools	5.2%
Exercise and Physical Activity	3.9%
Gender	2.6%
Vaccines and Immunizations	1.9%
Violence	0.6%
Eating Disorders	0.6%
Routine Well Checkups	0.6%
Emergency Preparedness	0.0%

*Number of Quotations with County Code and subgroup divided by number of quotations in parent group Educational Disparities and Barriers.

Analytic Interpretation & Participant Quotations

Strategies focused on empowering patients will improve a person's ability to make autonomous, informed decisions bringing about improved health and patient satisfaction outcomes.

I can certainly say that one of the biggest challenges for them is to truly understand how their actions and choices impact their health. We try to educate them on the proper practices that they should keep in mind, however when you are dealing with the adult population, they do want to exercise the choice of enjoying things that may not be the most healthy thing for them. We do put together groups and supports to, again, educate and provide services for them to make healthy choices like teaching them how to cook healthy. We also provide services that smoking cessation class, so that they can understand the effects of smoking, not only to themselves but to those around them, and we have seen in recent times that we are seeing -- longevity is starting to exist, whereas prior it was pretty typical that our population would be deceased 25 years earlier than someone without a disability, and we are seeing more longevity in the population, which is a good thing.

-Maryhaven Center of Hope

We utilize that model of care in our CMS innovation funding and we saw very positive results so you know to really engage people on the preventive level how to identify and understand their health, their triggers, and how to communicate effectively to the people that can help them and being able to communicate critically important to give them the tools the skills, but also the confidence to be able to do that. And there are evidence based strategies for that in terms of the mental emotional and behavioral health. I wanted to say that there are also other programs and interventions out there that can be provided on a general perspective for all healthcare providers that will make this more confident in dealing with issues of mental health and substance abuse.

-Dominican Sisters Family Health Services, Inc.

Providing education to the community about what services and programs are available, and how to access them will increase participation in self-management and accountability of personal health. Community Health Advocates who are able to explain and guide community members through various processes would serve as a resource person for underserved populations.

Caseworkers that will follow up. If that case management type of model in the community is available, they will have a point person. I see a lot of times when patients are out of our care, and they don't have that point of contact where they can facilitate whatever they are looking for, who to go, who to drive them to their care. They don't have active resources or they can't get them or don't utilize them. Maybe since the funding is there for these type of initiatives, maybe that can be part of at least what their goal is.

-John T. Mather Memorial Hospital

Health literacy should be engrained in health services to maximize comprehension of health information, allowing them to make clear and informed decisions in regard to their health.

I would say maybe push for health literacy. I think that's a main component of how to follow up, how to maintain yourself, how to access services and finding the way how to get that out to the community.

-John T. Mather Memorial Hospital

Mental Health and Substance Abuse

Due to the overwhelming intricacy of Mental Health and Substance Abuse, its associated conditions, contributing factors, linkages between other conditions and populations at risk, a high-level analysis was conducted to break down and further explore this Priority Area.

The NYS Department of Health Priority Area of promoting mental health and preventing substance abuse was broken down into 32 categories within 4 sub-groups. These groupings are broken down within the table below. Categories are sorted by highest percent of significance within each sub-group.

Promote Mental Health and Prevent Substance Abuse		
CATEGORIES	Substance Abuse	29%
	Cognitive	14%
	Eating Disorders	3%
	Developmental	2%
	Suicide	1%
	Hoarding	0%
CONTRIBUTING FACTORS	Lack of Service Availability	21%
	Coordination of Care for Mental Health	17%
	Patient Empowerment	16%
	Proper Treatment	13%
	Stigma	10%
	Housing	8%
	Transportation	7%
	Insurance Coverage	6%
	Mental Health Medications	6%
	Integration of Mental Health into Primary Care	3%
	Employment	1%
	Education in Schools	0%
LINKAGES	Abuse	9%
	Financial	7%
	Chronic Disease with Mental Health	6%
	Mental Health with Substance Abuse	2%
	Drug Use with Violence	2%
	ED Visits	0%
VULNERABLE POPULATIONS	Homeless	11%
	Veterans	10%
	Seniors	8%
	Young People	5%
	Young Women	3%
	Caregivers	2%
	Undocumented	2%
	Incarcerated	2%

*Number of Quotations with County Code and sub-group/category divided by number of quotations in parent group Mental Health and Substance Abuse.

Analytic Interpretation & Participant Quotations
Substance abuse, particularly heroin, is a growing concern on Long Island. An increase in the number of mental health treatment and recovery services would alleviate the length in appointment wait times.

With the heroin piece, there's a lack of response. For suboxone, you have to go to a special doctor, so we have limited doctors out there for that. Detoxes and rehabs are not so bad, but lack of accessible and quick response care for someone in crisis, but again, you are left to the hospitals. For the mental health piece, you could get someone an appointment if they were in crisis; now, that doesn't happen. I've been doing this twenty-two years. I see private clients, and when their kid needs a psychiatrist, they wait a month or two. Again, if the person is in crisis enough, they have to go to the emergency room. I sat at meetings with Suffolk Officials, and they know it's a problem, but as far as I see it, I don't think anything has been done about it.

-Hope House

A general lack of mental health service availability, including comprehensive-treatment and recovery approaches is creating a gap in need for service.

Counselors, therapists, and mental health providers are limited. There aren't people specializing in eating difficulties. Facilities are calling me and asking, Where do I send them? Where do I go? I have to send them out of state. Here we are, one point five million in each county, and we don't have the services to meet the needs of this population. I think that's something we need to look into. We need to find more coordination with mental health services, and just an awareness that there is an issue out there.

-Suffolk County Department of Health, Office of Health Education

Cases involving abuse and trauma are often linked with the occurrence of mental health issues, chronic disease and substance abuse.

I just want to add that a word that hasn't been brought up yet is "trauma." When I look at all five of these, I can see where trauma can play a role in all five of these. You know, we're talking about chronic diseases. When somebody here has suffered from a trauma might have an eating disorder, might have obesity issues, might be smoking tobacco or using drugs because of a trauma they've had. Healthy and safe environment. Trauma is such a big part. When we look at individuals who suffer from mental illness, we look at our veterans. We look at the children that we work with. The trauma can range from domestic violence in the home, physical abuse, sexual abuse, bullying. This is a total package.

-Association for Mental Health and Wellness

Veterans are often faced with mental health and substance abuse issues which put them at-risk for becoming homeless.

I deal mainly with low income veterans. The ones that are either homeless or at high risk of becoming homeless. Of course they have a lot of mental issues, PTSD, and also, substance abuse. There is a lot of that.

-Suffolk County United Veterans

Participating Organizations

Below is a list of organizations and representatives titles who participated as servicing Suffolk County or Bi-County populations.

Organization	Title of Participating Representative
Adelante of Suffolk County, Inc. Central Islip, NY	1. Director
Adelphi, Breast Cancer Hotline and Support Program Garden City, NY	1. Bilingual Outreach Coordinator
Aetna Better Health and Gurwin MLTCP Suffolk County	1. Senior Account Manager
AHRC Nassau Plainview, NY	1. Director of Health Services
Alzheimer's Association Melville, NY	1. Program Specialist
American Heart Association Plainview, NY	1. Director of Community Health
American Lung Association of the Northeast Hauppauge, NY	1. Senior Director, Health Education
Association for Mental Health and Wellness Ronkonkoma, NY	1. Deputy Director for Strategic Initiatives
Asthma Coalition of Long Island/American Lung Association of the Northeast Hauppauge, NY	1. Director
At Home Designs Wading River, NY	1. Certified Aging in Place Design and Resource Consultant
Babylon Breast Coalition Copiague, NY	1. President
Brentwood/Bay Shore Breast Cancer Coalition Brentwood, NY	1. Founder 2. Alexandra Velez
Brookhaven Memorial Hospital Diabetes Wellness Center Patchogue, NY	1. Diabetes Wellness Coordinator
Caring People Central Islip, NY	1. Home Care Consultant
Catholic Charities Hicksville, NY	1. Assessment and Advocacy Specialist 2. Housing Specialist
Good Shepherd Hospice, Catholic Home Care Farmingdale, NY	1. Account Manager
PSEG Long Island REAP program Hauppauge, NY	1. Account Manager
Community Housing Innovations Patchogue, NY	1. Assistant Executive Director

Cornell Cooperative Extension Riverhead, NY	1. Regional Program Director, Long Island
Dominican Sisters Family Health Services, Inc. Hampton Bays, NY	1. Director, New Programs
EOC of Suffolk Patchogue, NY	1. Outreach Coordinator
Family Service League of Long Island Bay Shore, NY	1. Coordinator Family Service League Positive STEP Program
Girls Incorporated of Long Island Deer Park, NY	1. Executive Director
Gordon Heights Civic Association Middle Island, NY	1. President
Honeywell, EmPower NY Nassau and Suffolk Counties	1. Program Coordinator
Hope House Port Jefferson, NY	1. Director, Project Hope II, Residential Social Worker 2. Director, Pax Christi Hospitality Center
HRH Care Coram, NY	1. Community Health Educator
Pilgrim Psychiatric Center Brentwood, NY	1. Director of Case Management
LGBT Network Woodbury, Bay Shore, Sag Harbor	1. Director of Community Engagement and Partnerships
Long Island Cares, Inc. The Harry Chapin Food Bank Hauppauge, NY	1. Chief Government Affairs Officer 2. Chief Network Officer 3. Nutrition Resource Manager and Chief Network Officer
John T. Mather Memorial Hospital Port Jefferson, NY	1. Director of Social Work
Maurer Foundation for Breast Health Education Hauppauge, NY	1. Program Manager
New York City Poison Control Center New York City	1. Health Educator
Outreach Bellport, NY	1. Bellport Site Director
Peconic Bay Medical Center, Cancer Services Program Riverhead, NY	1. Program Director 2. PETO Coordinator
RN Nurses Evolve Smithtown, NY	1. CEO
Safe Harbor Housing for Seniors Wading River, NY	1. Director
SCO Family of Services Dix Hills, NY	1. Program Director
SILO Suffolk County Living Organization Holtsville, NY	1. Housing Coordinator
St. Joseph's Village Senior Housing Selden, NY	1. Service Coordinator

St. Mary's Healthcare System for Children New Hyde Park, NY	1. Project Manager, Strategic Initiatives
Starflower Experiences Wyandanch, NY	1. Executive Director
Suffolk Cooperative Library System Bellport, NY	1. Administrator of Outreach Services
Suffolk County Bureau of Public Health Nursing Hauppauge, NY	1. Director of Suffolk County Bureau of Public Health Nursing
Suffolk County Department of Health Services, Office of Health Education Hauppauge, NY	1. Director of School Education
Suffolk County Department of Health, Maternal Infant Community Health Collaborative (MICHC) West Islip, NY	1. Program Coordinator
Suffolk County Office of Minority Health Great River, NY	1. Health Program Analyst I
Suffolk County United Veterans, AMHW Yaphank, NY	1. Outreach Coordinator
Suffolk County, Division of Prevention Medicine, Falls Prevention Programs Great River, NY	1. Management Coordinator
Sustainable Long Island Farmingdale, NY	1. Senior Community Planner
TempPositions Melville, NY	1. Account Executive
The American Cancer Society Hauppauge, NY	1. Senior Market Manager, Community Engagement
The Research Foundation for SUNY, Stony Brook, Adolescent Medicine Division Stony Brook, NY	1. CAPP Coordinator/Education Specialist 2. Education Specialist
Thursday's Child Patchogue, NY	1. EIS Manager
Town of Smithtown Horizons Counseling and Education Center Smithtown, NY	1. Assistant Program Coordinator, Assistant Director
United Lifeline & United Home Services Bethpage, NY	1. Director, Community Relations
Utopia Homecare Kings Park, NY	1. Certified Senior Advisor
VIBS: Domestic Violence and Rape Crisis Center Islandia, NY	1. SANE Coordinator 2. SANE Liaison
Visiting Nurse Service and Hospice of Suffolk Northport, NY	1. Director of Intake and Business Development
YMCA of Long Island Huntington, NY	1. Associate Director

Services Provided*

Organization	Services
<p>Adelante of Suffolk County, Inc. Central Islip, NY</p>	<p>Adelante of Suffolk County, Inc.'s mission statement is: To inspire forward movement in the lives of the diverse people of the community, by promoting a deeper understanding and respect for cultural differences and similarities; by empowering young people to realize their unlimited potential; and by protecting our seniors, and those with special needs, while improving their quality of life. Services provided includes: Youth Education; Adult Education; Mental Health; Behavioral Health; Food Pantry; Outreach and Advocacy; One Stop Center for Dept. of Labor and Dept. of Social Services in Central Islip.</p>
<p>Adelphi, Breast Cancer Hotline and Support Program Garden City, NY</p>	<p>The Mission of the Adelphi New York Statewide Breast Cancer Hotline and Support Program is to educate, support, empower, and advocate for breast cancer patients, professionals and the community. Services include a statewide breast cancer hotline, support groups, counseling, education, community outreach and advocacy.</p>
<p>Aetna Better Health and Gurwin MLTCP Suffolk County</p>	<p>Aetna Better Health and Gurwin offers a Medicaid Managed Long Term Care plan available to those who qualify and offers a Medicare-Medicaid plan to those who qualify via Aetna Better Health FIDA Plan. Keeping you healthy; keeping you home.</p>
<p>AHRC Nassau Plainview, NY</p>	<p>Nassau County AHRC Foundation is a registered 501(c)(3) charitable organization whose mission is to publicly solicit and receive funds for the benefit of individuals with intellectual and other developmental disabilities. Thousands of children and adults benefit from the Foundation's support to organizations such as AHRC Nassau, Brookville Center for Children's Services, Citizens, Advantage Care, Diagnostic Treatment Center and other community-based organizations serving those with special needs. Through our partner organizations, we're able to support services that span across a lifetime, ensuring that the people and families we support have the resources to live meaningful lives. 56 bed 24-hour nursing facility for people with I/DD and complex medical needs. Day Habilitation services for approximately 1500 adults with I/DD in Nassau, Medicaid Service Coordination, Special Needs Summer camp and respite program; Children's residential program for children with autism.</p>
<p>Alzheimer's Association Melville, NY</p>	<p>Alzheimer's Association is a non-profit organization providing information, resources, programs and support for individuals with Alzheimer's disease or a related dementia.</p>
<p>American Heart Association Plainview, NY</p>	<p>The American Heart Association is the nation's oldest and largest voluntary organization dedicated to fighting heart disease and stroke. Founded by six cardiologists in 1924, our organization now includes more than 22.5 million volunteers and supporters. We fund innovative research, fight for stronger public health policies, and provide critical tools and information to save and improve lives. Our nationwide organization includes 156 local offices and more than 3,000 employees. We moved our national headquarters from New York to Dallas in 1975 to be more</p>

	<p>centrally located. The American Stroke Association was created as a division in 1997 to bring together the organization's stroke-related activities.</p> <p>To improve the lives of all Americans, we provide public health education in a variety of ways. We're the nation's leader in CPR education training. We help people understand the importance of healthy lifestyle choices. We provide science-based treatment guidelines to healthcare professionals to help them provide quality care to their patients. We educate lawmakers, policymakers and the public as we advocate for changes to protect and improve the health of our communities.</p>
<p>American Lung Association of the Northeast Hauppauge, NY</p>	<p>The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease, through research, education and advocacy. Our work is focused on five strategic imperatives: to defeat lung cancer; to improve the air we breathe; to reduce the burden of lung disease on individuals and their families; to eliminate tobacco use and tobacco-related diseases; and to monitor and enhance organizational effectiveness.</p>
<p>Association for Mental Health and Wellness Ronkonkoma, NY</p>	<p>Services provided by the Association for Mental Health and Wellness include: Adult Psychiatric Rehabilitation, Clinic Services, Permanent & Supportive Housing, Veterans Shelter and Permanent Housing, Veterans Peer Support Services, Care Management for Adults, Mental Health Education, Trainings and Advocacy, Care Management for Children, Recovery Center, and Peer Support Groups.</p>
<p>Asthma Coalition of Long Island/American Lung Association of the Northeast Hauppauge, NY</p>	<p>The Asthma Coalition does not provide services, but is a resource for patient and provider education programs and materials. We train facilitators to teach asthma self-management and we also provide trainings for clinicians on the National Heart Lung & Blood Institute National Asthma Education and Prevention Program Expert Panel 3 Guidelines for Treatment and Diagnosis of Asthma.</p>
<p>At Home Designs Wading River, NY</p>	<p>At Home Designs is dedicated to adapting homes to people's needs as they grow older. We are an aging in place design resource company and work to empower older citizens and those with disabilities choice, control, dignity and independence. We work in partnership with architects, contractors and health care professionals to create a team approach to provide services to make a home more livable. We offer home safety assessments, design solutions and provide community resources to support aging in the environment one chooses. Those resources include adult day programs, home care agencies, agencies who provide respite, eldercare attorneys and geriatric care managers and doctors that make house calls. We also provide long term resources when remaining at home is no longer the best solution.</p>
<p>Babylon Breast Coalition Copiague, NY</p>	<p>Babylon Breast Coalition provides services for the community including: transportation, cleaning services, prepared foods, etc. Services are provided for women undergoing treatment in breast and gynecological cancers. We also provide women with a gift of hope and inspiration, bag with many items in it for women diagnosed with breast or gynecological cancers.</p>

<p>Brentwood/Bay Shore Breast Cancer Coalition Brentwood, NY</p>	<p>The Brentwood/Bay Shore Breast Cancer Coalition provides support for food, transportation, medications, and other basic needs.</p>
<p>Brookhaven Memorial Hospital Diabetes Wellness Center Patchogue, NY</p>	<p>The Brookhaven Memorial Hospital, Diabetes Wellness Center provides Diabetes Self-Management Education Program for Type 1 and Type 2 diabetes; "Wellness Wednesday - "Living Well Series" Wellness and Prevention program; You do not have to have diabetes to join the FREE classes FREE classes offered,: Support groups Type 1 and Type 2 DM, Lectures, Chair Yoga, Walk for Wellness Walking Club, Cooking Demonstrations, Garden Club, Smoking Cessation classes, Diabetes Prevention Program, Fall Prevention Program, Celebration of Life Event, 5 Alive Club.</p>
<p>Caring People Central Islip, NY</p>	<p>Caring People provides care coordination, home health aide services, RN & LPN services.</p>
<p>Catholic Charities Hicksville, NY</p>	<p>Catholic Charities provides services including: Chemical Dependency Services, Commodity Supplemental Food Program, Disaster Response, HIV/AIDS Services, Housing (affordable apartments for Seniors and People with Disabilities), Immigrant Services, Mental Health Outpatient Services (clinics/suicide prevention training), Mental Health Residential Services (Teaching Family/ Project Independence / Project Veterans Independence), Nutrition Outreach Education Project (SNAP), Parish Social Ministry(Support for local Programs/Central Information and Referral), Regina Maternity Services, Residential Services for People with Developmental Disabilities (Case Management/ Community Integration/Skills Development/Community Residences), Senior Services (Case Management/Meals-On-Wheels/Senior Community Service Centers), Women, Infants and Children Program (Food/Nutrition Education/Referral to Health and Social Services).</p>
<p>Good Shepherd Hospice, Catholic Home Care Farmingdale, NY</p>	<p>Catholic Home Care is a Certified Home Care Agency providing Skilled Nursing, Physical Therapy, Occupational Therapy, Speech Therapy, Social Work and Aides to Home Bound patients with Acute care needs. Good Shepherd Hospice provides home-based End Of Life services for terminally ill Home bound patients and their families.</p>
<p>PSEG Long Island REAP program Hauppauge, NY</p>	<p>The PSEG LI REAP is a program for income-eligible customers designed to help them save energy and lower their electric bills. Participation in REAP can make your home healthier and safer. In addition participants are guided to other services outside our company that can help them with any special needs.</p>
<p>Community Housing Innovations Patchogue, NY</p>	<p>Community Housing Innovations provides emergency shelter for singles and families, transitional to permanent housing for single men and women, supportive housing for a variety of at risk populations (mentally ill, substance abuse, disabled), foreclosure prevention, first time homeownership assistance and education, permanent affordable housing throughout Long Island and the Lower Hudson Valley.</p>
<p>Cornell Cooperative Extension</p>	<p>Cornell Cooperative Extension of Suffolk County assists and</p>

<p>Riverhead, NY</p>	<p>educates residents, businesses and professionals in a broad spectrum of topics by providing research-based information on parenting, diabetes management, nutrition and wellness, horticulture, environmental protection, marine restoration and sustainable agriculture.</p> <p>Experts from our four main program areas—Family Health and Wellness, Marine, Agriculture and 4-H Youth Development—reach tens of thousands of adults, children, professionals and businesses each year.</p> <p>We bring this free and low-cost knowledge directly to people at workshops, children’s camps, libraries and schools. We also work one-on-one with fisherman, farmers and growers to strengthen these industries, bringing tourism and advancing economic development. CCE programs have had a significant impact on communities and industry in Suffolk for nearly a century.</p>
<p>Dominican Sisters Family Health Services, Inc. Hampton Bays, NY</p>	<p>Dominican Sisters Family Health Service, an affiliate agency of Catholic Charities of the Archdiocese of New York, offers a comprehensive suite of preventative, treatment and care management services in eleven counties throughout New York State.</p>
<p>EOC of Suffolk Patchogue, NY</p>	<p>The Economic Opportunity Council of Suffolk, Inc. (EOC of Suffolk, Inc.) is a not-for-profit 501 (c) (3) minority community based organization (CBO) incorporated in the State of New York on May 5, 1967. The EOC of Suffolk, Inc. is Suffolk County's designated community action agency, recipient of the Federal Community Service Block Grant, which supports activities designed to assist low-income families and individuals receiving assistance under part A of Title IV of the Social Security Act.</p> <p>Our mission is to promote a goal of self-sufficiency by broadening the minds of children, revitalizing communities, and assisting families and children in need through the provision of services and to coordinate available federal, state, local and private resources.</p> <p>Services provided include: Family development; housing programs; SNUG Violence Prevention; Suffolk County Family Court Children’s Nursery; Veteran’s Services; HIV/AIDS/HIV(-) targeted prevention and support services; Wyandanch Weed and Seed; Chronic Health Care Coordination; Montauk Child Care; Services for People with Developmental Disabilities; Way to Grow Child Care Learning Center; Youth and Adolescent Services.</p>
<p>Family Service League of Long Island Bay Shore, NY</p>	<p>Since the onset of Family Service League, our mission has been to maintain and strengthen the family structure throughout the communities we serve. Our mission is challenged ever day— by social pressures, economic hardship and the erosion of moral responsibility. But our determination is strong and our commitment unwavering since 1926. Our spectrum of social service programs comprehensively addresses the multitude of pressing social and economic issues facing Long Islanders today, and is meeting the challenges that our communities must face in the years to come.</p> <p>FSL is one of the largest non-profit social service organizations in the region. Our valued programs help and serve over 50,000 people annually. FSL delivers tangible help and crisis intervention across a wide range of service areas including mental illness, drug and alcohol addiction, homelessness, job training, computer literacy, trauma counseling, at-risk youth, and family and senior citizen support services. Additionally, FSL operates pre-school learning centers, Universal Pre-K programs, recreational camping,</p>

	and Suffolk County's only Community School. All told... FSL operates more than 60 programs at over 21 locations throughout Suffolk County.
Girls Incorporated of Long Island Deer Park, NY	Girls Incorporated of Long Island provides research-based girls empowerment programming to girls 5-18 year olds. We provide afterschool programming, workshops at CBO's and libraries, a girls' conference and some parent-child programs.
Gordon Heights Civic Association Middle Island, NY	The mission of the Gordon Heights Civic Association is to develop and maintain among the resident of Gordon Heights, Long Island, New York an interest in the civic, social, economic, and political welfare of said residents and through organization to promote and conduct activities to this end. To promote good will, mutual understanding, and a closer relationship among the members and to give practical expression to these purposes by extending voluntary assistance in times of illness, distress, or crisis. Focus areas and services include: legislation; law enforcement; housing; fire district; highway department; parks department
Honeywell, EmPower NY Nassau and Suffolk Counties	EmPower New York provides no-cost energy efficiency solutions to income-eligible New Yorkers. Nearly 100,000 of your neighbors are saving energy and saving money with EmPower New York, without spending a dime. Whether you own your home or rent, a participating contractor will be assigned to you to assess if your home would benefit from free energy upgrades such as: Air sealing to plug leaks and reduce drafts; Insulation to make your home more comfortable all year round; Replacement of inefficient refrigerators and freezers; New energy-efficient lighting; Plus, free health and safety checks of your smoke detectors, appliances and more.
Hope House Port Jefferson, NY	Since its founding in 1980, the Community House with 10 beds has grown to a 30-bed house that provides a compassionate approach to crisis intervention and a residential community for homeless young people in need. The program serves primarily youth between the ages of 16 and 21 years. It offers a creative living space where a young person can grow and develop. Services offered include: Hope Academy; Pax Christi Hospitality Center; The Human Services Center; The Sr. Jean Beagan, O.P. Family and Children Counseling Center; Montfort Therapeutic Residence/Our Lady of Peace Academy; St. Louis de Montfort Academy; Wisdom House; Siena House; St. Maximilian Kolbe Outpatient Addictions Treatment Center
HRH Care Coram, NY	Since Hudson River HealthCare opened its doors in 1975, we have remained committed to providing high quality health care to all who seek it. Hudson River HealthCare, now known as HRHCare, has multiple locations throughout New York's Hudson Valley and Long Island. We are a not-for-profit, New York State licensed, federally qualified health center. HRHCare delivers culturally sensitive, linguistically appropriate, full life cycle primary, preventative, behavioral and oral health care and enabling & care coordination services, regardless of one's ability to pay. Our goal and commitment is to help our communities get & stay healthy. We believe high quality health care starts with compassion and dignity, and is available when and where you need it.

<p>Pilgrim Psychiatric Center Brentwood, NY</p>	<p>Pilgrim Psychiatric Center provides a continuum of inpatient and outpatient psychiatric, residential, and related services with approximately 380 inpatient beds and 4 outpatient treatment centers plus one ACT Team throughout Suffolk County. The campus includes several residential agencies on the grounds such as Central Nassau Guidance Center and Transitional Services, Charles K. Post, a residential treatment center operated by the New York State Office of Alcohol and Substance Abuse, and Phoenix House, a residential treatment center for those with substance abuse diagnosis. Development of the surrounding acreage has been planned for the near future. The campus is within easy access to parkways, public transportation, and local shopping.</p>
<p>LGBT Network Woodbury, Bay Shore, Sag Harbor</p>	<p>The organizations of the LGBT Network provide a variety of programs and services at its four community centers, including one in Sag Harbor on the East End, one in Bay Shore in Western Suffolk, one in Woodbury in Nassau County, and one in Little Neck in Queens, with a fifth location slated to open in Patchogue in Suffolk County in late 2016/early 2017. Service provided include: Youth Leadership and Development; Social and Recreational; Community-Building; Health and Wellness; Advocacy services; Community Education as well as Special Events and Initiatives.</p>
<p>Long Island Cares, Inc. The Harry Chapin Food Bank Hauppauge, NY</p>	<p>Long Island Cares brings together all available resources for the benefit of the hungry on Long Island, and provides to the best of our ability for the humanitarian needs of our community. We provide food when and where it's needed, while promoting self-sufficiency and public education.</p>
<p>John T. Mather Memorial Hospital Port Jefferson, NY</p>	<p>John T. Mather Memorial Hospital is an accredited 248-bed, non-profit community teaching hospital dedicated to providing a wide spectrum of health care services of the highest quality to the residents of Suffolk County in a cost effective manner. As members of the Mather Hospital Family - trustees, medical staff, hospital staff, volunteers and benefactors - we are committed to providing care to the best of our ability showing compassion and respect and treating each patient in the manner we would wish for our loved ones. We will meet or exceed each patient's expectations through the continued collaborative efforts of each and every member of the Mather Hospital Family.</p>
<p>Maurer Foundation for Breast Health Education Hauppauge, NY</p>	<p>The Maurer Foundation for Breast Health Education provides: Breast Health Educational Programming for high schools, colleges, community groups and businesses. We offer bilingual programming as well.</p>
<p>New York City Poison Control Center New York City</p>	<p>The New York City Poison Control Center is a national, free hotline staffed by pharmacists and nurses who respond to intentional and unintentional poisonings by providing recommendations</p>
<p>Outreach Bellport, NY</p>	<p>Building healthy lives is what Outreach is all about. For over three decades, we've been a premier provider and champion of quality, life-changing drug and alcohol abuse treatment and training services - the kind that help individuals and their families throughout</p>

	<p>the Greater New York area cope with their problems, heal themselves and move forward in a more positive direction. We know. We understand. And we're totally committed to making a difference now and in the future. Our mission is to inspire individuals and families to achieve a life of unlimited potential by developing and delivering the highest quality evidence-based behavioral health services and training.</p>
<p>Peconic Bay Medical Center, Cancer Services Program Riverhead, NY</p>	<p>At Peconic Bay Medical Center, our Suffolk County Cancer Services Program is regionally acclaimed for its proactive approach to patient care. We are here for you through every step of the process, from an initial screening through creating an individualized, state-of-the-art cancer treatment plan. There's a reason why Peconic Bay Medical Center is considered a top Long Island medical center, and that's because we put patients first. We believe that every person in Suffolk County deserves access to high-quality health care, especially cancer screenings. As part of our cancer services program, we offer free cancer screening to uninsured residents of Suffolk County who meet eligibility requirements.</p>
<p>RN Nurses Evolve Smithtown, NY</p>	<p>RN Nurses Evolve provides a professional approach to the sourcing of the most experienced and vetted Nurse Practitioner for doctor offices, hospitals and clinics.</p>
<p>Safe Harbor Housing for Seniors Wading River, NY</p>	<p>Safe Harbor Housing for Seniors provides Transitional Housing For Abused Elderly.</p>
<p>SCO Family of Services Dix Hills, NY</p>	<p>SCO Family of Services provides a multitude of human service programs ranging from residential services (OMH/ OPWDD), day school/ educational services, community residence programs, shelters, mother-baby programs, residential substance abuse services, Bridges to Health, Out-patient Community Mental Health Clinic.</p>
<p>SILO Suffolk County Living Organization Holtsville, NY</p>	<p>SILO Suffolk County Living Organization provides: Benefits and financial Advisement; Housing; Advocacy; Educational and Transition advisement; Barrier removal; Employment and incentives for people with disabilities; Lending Closet and TR Aid; Travel and transportation services.</p>
<p>St. Joseph's Village Senior Housing Selden, NY</p>	<p>St. Joseph's Village Senior Housing provides housing, social services, counseling, program planning, and beyond.</p>
<p>St. Mary's Healthcare System for Children New Hyde Park, NY</p>	<p>St. Mary's Hospital for Children is a 97-bed post-acute Skilled Nursing Facility. Services provided include: St. Mary's Home Care Certified Home Health Agency (Special Needs CHHA ages 0-44) provides Skilled Nursing, PT, OT, ST, Nutrition, Social Work St. Mary's Community Care Professionals Licensed Home Care Services Agency (LHCSA) – provides Private Duty Nursing St. Mary's Case Management through Care at Home and Medicaid Service Coordination; Center for Pediatric Feeding Disorders Early Education Center (Medical Special Education preschool).</p>
<p>Starflower Experiences</p>	<p>Starflower Experiences provides educational programs and events</p>

Wyandanch, NY	focused on the environment and our relationship to our living planet.
Suffolk Cooperative Library System Bellport, NY	The Outreach Services department of the Suffolk Cooperative Library System provides outreach guidance and consultation to the 56 public libraries in Suffolk County. Outreach Services works to ensure access to people with disabilities.
Suffolk County Bureau of Public Health Nursing Hauppauge, NY	The Suffolk County Bureau of Public Health Nursing is a home care agency that provides skilled nursing care and specialize in maternal child health in addition to wound care and asthma.
Suffolk County Department of Health Services, Office of Health Education Hauppauge, NY	The Suffolk County Department of Health Services, Office of Health Education provides public health education addressing those high risk behaviors that CDC has identified as causing mortality and morbidity among our population. Tobacco: Adult cessation programs, Vendor Education classes for Tobacco Vendors, Enforcement of ATUPA and Clean Indoor Air Laws, Tobacco and emerging tobacco prevention programs for secondary school students and community agencies., Dietary and Physical Activity Patterns: Diabetes Prevention Program for adults, Eating Disorders and Body Image Awareness programs for secondary school students, college age students and school based and mental health professionals, puberty lessons Safety and Injury Prevention: Peer Education Trainings-Bullying Prevention (Up-stander Programs), Suicide Prevention, Sports Injury Prevention for community members, SunWise, Summer Safety, Defensive Driving for County Employees STI/HIV Prevention: STI/HIV prevention programs for secondary school students Drugs and Alcohol: Narcan trainings for professionals, community agencies and parents Public Health Education Communications: Quarterly newsletters (The Health Issue, SADD Newsletter) to schools concerning emerging health concerns
Suffolk County Department of Health, Maternal Infant Community Health Collaborative (MICHHC) West Islip, NY	The Suffolk County MICHHC Program provides services to women of childbearing age, including outreach, education, advocacy, referrals to services, service coordination and home visiting. These services are delivered by community health workers who are indigenous to the communities we serve, including Bay Shore, Brentwood, Central Islip, Amityville, Wyandanch and Copiague. We also provide educational workshops for professionals and consumers.
Suffolk County Office of Minority Health Great River, NY	The Suffolk County Office of Minority Health provides community Outreach and Education on ways to reduce risk of Chronic Disease such as Diabetes, Obesity/Overweight, Heart Disease/ Stroke, Cancer, HIV/AIDS and STIs, Infant Mortality.
Suffolk County United Veterans, AMHW Yaphank, NY	Suffolk County United Veterans runs an emergency shelter for homeless veterans, as well as transitional and permanent housing for veterans; maintains two food pantries; performs outreach for the VA's supportive services for veteran families program, which assists homeless veterans and those at high risk of becoming homeless to obtain permanent housing; provides case management, education and job training and PTSD support.

<p>Suffolk County, Division of Prevention Medicine, Falls Prevention Programs Great River, NY</p>	<p>The Suffolk County Department of Health Services through the Division of Preventive Medicine has partnered with the New York State Department of Health to implement evidence-based community fall prevention programs that serve older adults. Programs reach all regions of the county utilizing different resources and partnerships that provide falls prevention programming in Suffolk County communities. These programs are Staying Independent for Life, a two hour falls and injury prevention seminar for senior citizens, Stepping On: Building Confidence and Reducing Falls, and Tai Chi, Moving for Better Balance provided in partnership with the Suffolk County YMCA. Between 2010 and 2015 these programs collectively reached over 2,800 senior citizen residents to teach them about how to prevent falls in the home and live independently.</p>
<p>Sustainable Long Island Farmingdale, NY</p>	<p>The mission of Sustainable Long Island (SLI) is to promote economic development, environmental health, and social equity for all Long Islanders, now and for generations to come. SLI is a catalyst and facilitator for sustainable development. We cultivate the conditions, identify resources, and provide tools to advance sustainability on Long Island.</p> <p>Our programs range from working to improve healthy food access (Youth-staffed Farmers' Market Project; Community Garden Initiative; Healthy Corner Stores Project; NYSDOH Creating Healthy Schools & Communities); environmental health (Town of Islip Local Waterfront Revitalization Program; Long Beach Master Comprehensive Plan Update/Local Waterfront Revitalization Program; Riverhead Brownfield Opportunity Area Project); and improve economic development (Long Beach Business Support Program; Culture and Arts-based Tourism Corridors; Bellport Area Beautification and Job Readiness Project).</p>
<p>TempPositions Melville, NY</p>	<p>Founded in 1962, The TempPositions Group of Companies is one of the country's largest regional full-service staffing agencies offering temporary, contract, temp-to-hire, direct hire and recruitment process outsourcing services. We serve the New York, Connecticut, New Jersey and Northern California markets. While there are very few companies that can offer clients a truly broad range of skill sets, we can. We're comprised of multiple specialized divisions, each staffed with individuals possessing years of hands-on industry experience. By having similar backgrounds to both our clients and the professionals they place, our internal staff understands the nuances and can select precisely the right individuals for the job. They can also proactively identify innovative ways of assisting our clients, and develop the appropriate systems or programs to translate these ideas into reality.</p>
<p>The American Cancer Society Hauppauge, NY</p>	<p>For over 100 years, the American Cancer Society (ACS) has worked relentlessly to save lives and create a world with less cancer. Together with millions of our supporters worldwide, The American Cancer Society helps people stay well and get well, find cures, and fight back against cancer. Programs provided includes: Road to Recovery, Reach to Recovery, Wig Program, Look Good Feel Better, Clinical Trials Matching Program, Hope Lodge,</p>

	cancer.org, National Cancer Information Center (1-800-227-2345), I Can Cope, ACS Cancer Survivors Network.
The Research Foundation for SUNY, Stony Brook, Adolescent Medicine Division Stony Brook, NY	<p>The Research Foundation for SUNY, Stony Brook Adolescent Medicine Division is the controlling agent for the Comprehensive Adolescent Pregnancy Prevention (CAPP) grant and as such, most of the services provided are through the grant initiative. Services provided include:</p> <ul style="list-style-type: none"> • Evidence-based interventions and adult preparation workshops for adolescent groups or individuals. The interventions address reproductive and sexual health of teens and young adults up to the age of 21 and include information on abstinence and healthy relationships. The workshops can cover financial literacy, career development, emotional and social well-being, self-esteem, to name a few. • Linkage to medical care at any one of three Adolescent Medicine Clinics for youth ages 12 through 25. • Assistance with enrollment into the Family Planning Benefit Program. • Workshops for community members and professionals on how to speak with your teens about their reproductive health, Minors' rights to confidentiality, what's happening in Suffolk, mental health, and beyond. • Provide resources to community and social services.
Thursday's Child Patchogue, NY	The mission on Thursday's Child is "to develop, to coordinate, and to provide services for People Living with HIV/AIDS on Long Island." The mission of the Early Intervention Service program is to offer assistance to individuals who are newly diagnosed with HIV, assistance to those who need to re-gain access to care, and to promote health through community outreach and education.
Town of Smithtown Horizons Counseling and Education Center Smithtown, NY	The Town of Smithtown Horizons Counseling and Education Center provides individual and group counseling for both adolescents and adults with substance use disorders (including a satellite site at Hauppauge High School); psychoeducation about substance use; prevention/education services to individuals in a variety of community-based settings; parenting classes; gender-specific clinical programming; psychiatric evaluation; medication management services; we also host an Ancillary Withdrawal (Suboxone induction) program operated by Central Nassau Guidance and Counseling Services at our main site.
United Lifeline & United Home Services Bethpage, NY	United Lifeline and United Home Services provides personal emergency response systems, medication dispensers, cellular units and other technology for safety and independence as well as membership based, discounted home maintenance program.
Utopia Homecare Kings Park, NY	Utopia Home Care pledges to treat every client with compassion and dignity, and to help them achieve as much independence as possible. Our staff is experienced in every level of care, including accident rehabilitation, post-hospital convalescence, illness, and short- and long-term disability. We offer a variety of care services, tailored to address the unique needs of each individual and available 24 hours a day, 7 days a week. Services provided include: home care services; assisted living; companions and staffing

	services.
VIBS: Domestic Violence and Rape Crisis Center Islandia, NY	VIBS provides free and confidential services to survivors of domestic violence and rape/sexual assault. Services include: counseling for children, teens, adults, and elders; legal advocacy; outreach and court accompaniment; crisis/hotline intervention; and community education. We also have 3 SANE (Sexual Assault Nurse Examiner) Centers located in Suffolk County. The goal of these centers is to provide confidential and sensitive treatment to rape and sexual assault victims. Services provided include: medical care/forensic examination, medications to prevent STIs/HIV/pregnancy (if applicable), evidence collection and storage, emotional support and advocacy, and referrals for follow-up counseling and/or medical care.
Visiting Nurse Service and Hospice of Suffolk Northport, NY	Visiting Nurse Service and Hospice of Suffolk is a not-for-profit home care and hospice agency providing registered nurses, enterostomal therapy & wound care, home health aide care, physical, speech and occupational therapies, hospice care, in patient and at-home, medical social workers, registered dieticians, palliative care, infusion therapy and acupuncture.
YMCA of Long Island Huntington, NY	The YMCA is a cause-driven-driven organization that is for youth development, healthy living and social responsibility. The Y's major programs include after school programs, daycare programs, preschool education, physical fitness, chronic disease prevention, aquatic safety and more. Our service locations have gyms, weight rooms, swimming pools, classrooms, camp grounds, multi-space centers and other facilities. It is important to the Y that all persons- "regardless of age, income or background" – can participate in Y programs. The goal of the YMCA is to strengthen communities. Each location supports a neighborhood, so in the YMCA's terms the YMCA serves, or is anchored in more 10,000 communities world-wide.

*List of services provided collected from Summit Event participant pre-survey or from participating organization's website. This list may not be inclusive of the entirety of services provided by the organization.

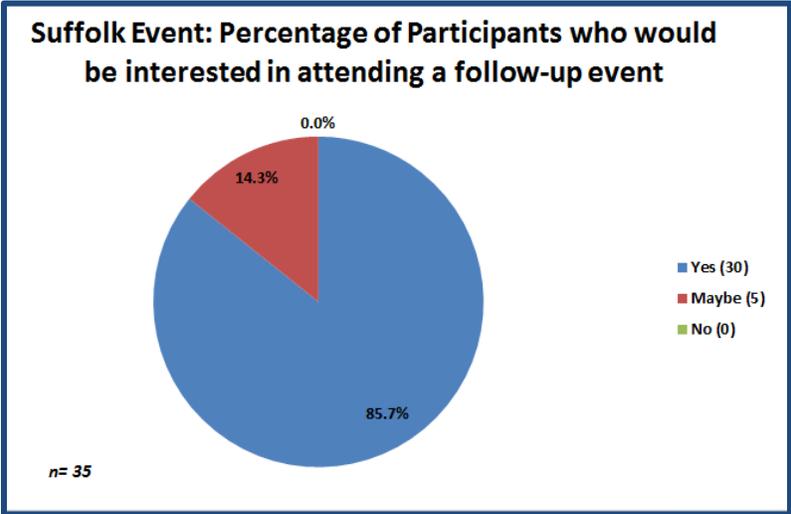
Conclusion

Qualitative data collected during the Community-Based Organization Summit Events has provided a rich assessment of what issues community-level service providers feel are the most pressing for community members on Long Island. The data analysis process was strategically planned out to focus not only on the NYS Prevention Agenda areas, but to also bring other high-priority concerns related to health equity, disparities and barriers to care for people in Suffolk County. The selected analysis strategy was only one way, of many possible, to draw parallels, examine correlations and determine the need for additional support within Suffolk County.

Qualitative data from community key-holders is incredibly valuable to the Long Island Health Collaborative's mission to assist the full spectrum of health and social service providers to provide better healthcare, more efficiently and cost-effectively for all Long Islanders through population health activities. Information collected will be investigated continually and synthesized appropriately to support future partnerships and program funding.

In addition to data collection, both summit events provided vast networking opportunities for participants, with time built in to meet and converse with community partners built directly into the program. During the networking opportunity, participants learned about other programs and organizations serving their target community and establish connections with fellow service providers. The response from participants was overwhelmingly positive, with many encouraging the allowance of more networking time during future events. In response to this feedback, the Long Island Health Collaborative sent an evaluation survey to all participants to gauge the interest in attending a follow-up event.

Of 35 participants who completed the evaluation survey, 35(100%) responded yes or maybe when asked if they would be interested in attending a follow-up event.



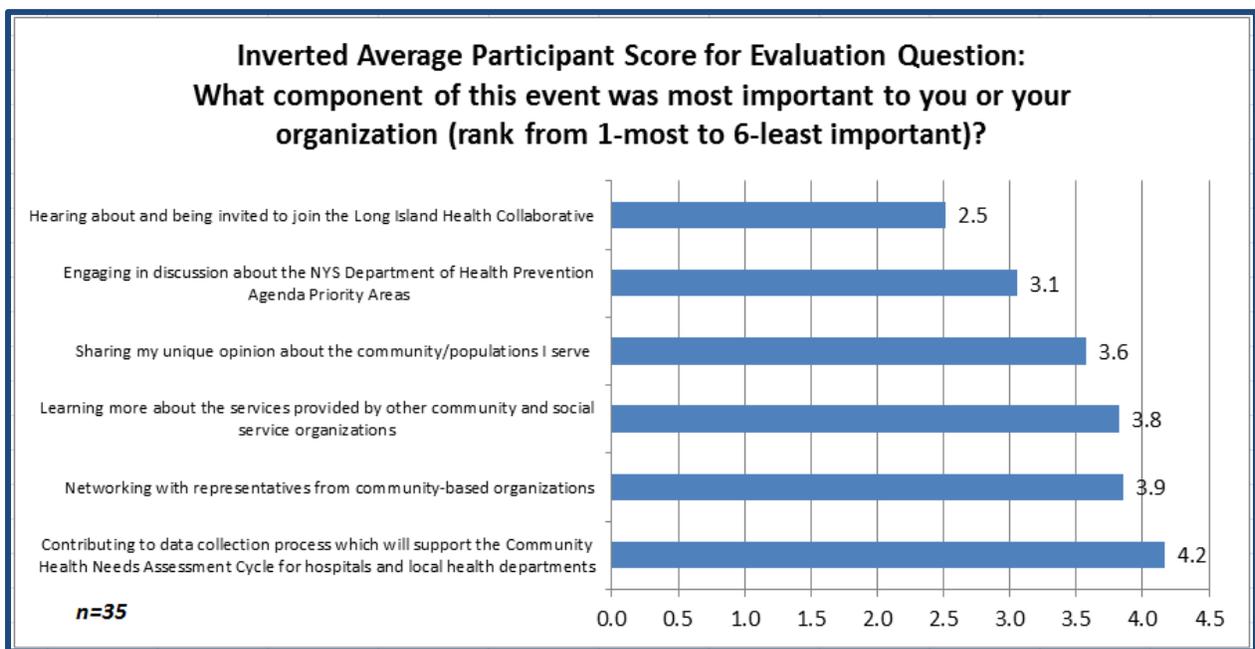
Participant feedback was overwhelmingly positive with select quotes listed below:

- I had wished our discussions could have progressed and unfolded, without such a time constraint... maybe another half hour would have been beneficial.
- It is important to have the opportunity to connect in common cause, especially because services here are so "silo-ed." Understanding the needs and clearly defining the problems is a huge step,

but we need to really do something to address the problem. I think this initiative shows a really promising start, but I really hope it leads us to action.

- I appreciated the stenographer; knowing that what was being said has the chance of really being heard by people who maybe could make a difference in these matters.
- I liked the table discussion - it was a comprehensive way to get a lot of opinions on the same subject quickly.
- Wonderful opportunity to share information and concerns with other CBO representatives.

In response to the question: “*What component of this event was most important to you or your organization?*”, the majority of participants felt that Contributing to the data collection process which will support the Community Health Needs Assessment Cycles for hospitals and local health departments and networking with representatives from community-based organizations were the most valuable aspects of participation.



The most valuable takeaway following Summit Events was the inherent passion and vested interest within community partners to improve health outcomes through advancement of equity and reduction of disparities and barriers within communities on Long Island. The Long Island Health Collaborative is planning future events to address the results of this data analysis, and to provide community partners with an extended opportunity to enhance and support collaboration among colleagues.

The Long Island Health Collaborative would like to send express unwavering gratitude to the community based organizations who participated during the CBO Summit Events. The voice of our front-line community service professionals will have a profound effect on our plans for working collaboratively to address health barriers, disparities and social determinants of health into the coming months. We sincerely appreciate your devotion and advocacy to the betterment of health for all Long Islanders.

For more information about the Long Island Health Collaborative, please visit: www.lihealthcollab.org

Appendix

Script for Community-Based Organization Summit Event Facilitators

Introductions

1. *Introduce yourself to the group*
2. *As you notice, we have a court reporter with us today. This is (Name of Transcriber)*

Information collected during this discussion will be used to develop the Community Need Assessment Reports for Nassau and Suffolk counties. We would like to use direct quotes from our conversation, referencing your organization, and without using your name to supplement the report. Please let us know if you do not want your organization to be quoted. If there are questions you do not want to respond to, you can pass. Your participation in this program is voluntary. With your permission, this interview will be transcribed and documented. Do I have permission from everyone?

This discussion will last about one hour and twenty minutes. If after this interview you have questions or concerns, you may contact the Long Island Health Collaborative at 631-257-6957. Thank you.

I would like to begin with Introductions. Going around the table, please introduce yourself and tell me what organization you represent.

Everyone should have a card (or two for bi-county organizations). This will help us identify who would like to speak (or on behalf of which county they are speaking).

Demonstrate Example by holding up cards "In Nassau we feel that youth risk is a concern, while in Suffolk, we feel senior housing is a concern. In Nassau and Suffolk, we feel that transportation is a concern".

To ensure (Name of Transcriber) is able to accurately capture responses and match them to the representative speaking, it will be important to adhere to the event guidelines, which I will read to you:

1. *If you would like to share your opinion or respond to another speaker's feedback, please raise your number card. I (the facilitator) will prompt you to speak.*
2. *Everyone will be given a chance to respond.*
3. *Do your best to talk slowly, taking pauses, so the transcriber can capture your response accurately.*
4. *Although it may be tempting, please do not interrupt the person speaking.*
5. *During this discussion, we hope to hear a wide range of views and differences in opinion.*
6. *Details from this discussion and participant identities will remain confidential among the group.*

Are there any other guidelines that you would like to add to this list?

Does anyone have questions about the event guidelines?

Let's get started:

(5 MINUTES)

1. *What makes you excited to work for the organization you are representing? (5 MINUTES)*
2. *Please identify some of the biggest health problems for the people/communities you serve. {Leave this as open ended, probing for specificity, then follow-up with list of priorities}.*
3. *Now we are going to move a little deeper into this discussion. (5 MINUTES)*
Hand each group member a list of NYS DOH priorities with focus areas. Read through the priority areas. Ask participants to review and consider.

a. Of the focus areas listed, which are important to the people/communities you serve? First participant to speak identifies one priority area (eg. Mental Health/Substance Abuse). The facilitator should remain on this priority area until everyone has provided feedback (if applicable). Ask if anyone else can identify areas of need within this priority area. Then move on to the next priority area.

Facilitator will be responsible for ensuring all priority areas have been mentioned by end of discussion.

(10 MINUTES)

b. What specific health concerns, within these focus areas, are important to the various groups your organization serves?

If participant conversation moves toward the topic of "barriers", facilitator should re-direct the focus of the conversation by reminding the group to look at the list of health concerns under each focus area. Ask "How are the health concerns listed on the handout important to the people/communities you serve?"

(5 MINUTES)

4. According to the Office of Minority Health (2011), Health Disparities are defined as "Differences in health outcomes that are closely linked with social, economic and environmental disadvantage". Let's discuss some of the factors related to health disparities that affect the health care community members receive.

Ask questions a-f. Probe participants for specificity as they provide responses.

- In what way do race and/or ethnicity affect the health care they receive?
- How do issues of identity related to gender affect the health care they receive?
- Describe how language affects the health care they receive?
- How does age affect the health care received by the community you serve?
- How do disabilities affect the health care they receive?
- How does financial security affect the quality of health care they receive?
- Are there any other factors that we have not discussed? Please describe.

(10 MINUTES)

5. What barriers keep people in the community you serve from obtaining or using the resources needed to address these issues?

If participants are having trouble, please give an example. {Ideas could include: transportation, issues of insurance, religion/cultural difference, fear, doctor availability, etc.}

(5 MINUTES)

6. How can these barriers you described be addressed?

- In what ways can services be improved?
- What additional services are needed in the community you serve?

What strategies do you recommend for overcoming these barriers? (5 MINUTES)

7. What resources are used by your community members in relation to the health needs you have identified?

If participants are having trouble, please give an example. {Ideas could include: (i.e. health services, community education programs, screenings, etc.)}

- How often do they access these services?
- Where do they access these services?
- What resources are not available that you feel should be?

(5 MINUTES)

8. What additional services or programs are needed to improve the community's health?

(5 MINUTES)

Rev. 2/5/16