

## Meeting Summary for May 30, 2013

Good afternoon everyone:

Below is a summary of what was discussed at the May 30, 2013 Population Health Workgroup Meeting (Suffolk County). And in case you did not receive these or misplaced the items, I attached the summary report of the community health needs assessment (pdf file) and Dr. Corrarino's (SC Dept of Health) powerpoint summarizing relevant public health data from the NYS Dept of Health website. These two documents informed the group's decision to select Prevent Chronic Diseases as the Prevention Agenda priority. We further choose to focus on two areas under that Priority: 1. reduce obesity in children and adults, and 2. increase access to quality preventive care and chronic disease management programs in clinical and community settings. We will integrate prevention and treatment of mental health/substance abuse into the Priority.

Also attached, is my powerpoint that summarizes the CHNA and Prevention Agenda mandates and processes – useful for back grounding and frame of reference. Finally, attached is an article from *Healthcare Business Leadership* magazine I happened upon after our May 30<sup>th</sup> meeting that talks about the Health Leads program. That program is described in greater detail below.

**PLEASE NOTE: We next meet on Tuesday, June 25 from 2 to 4 p.m. at the offices of the Nassau-Suffolk Hospital Council. This is a change from the original date of June 26<sup>th</sup> that we initially set. Please, always RSVP your attendance at a workgroup meeting to Lillian Curry [lcurry@nshc.org](mailto:lcurry@nshc.org), as this will assure I and/or invited speakers have proper amount of handouts and there are enough refreshments.**

### Summary of May 30, 2013 Meeting

In attendance: Sharon DiSunno (Southampton Hospital); Chris Hendriks (CHSLI); Jen Ludwin (NS/LIJ Health System); Heather Reynolds (St. Catherine of Siena Med Ctr); Stu Vincent (John T. Mather Mem Hospital); Tina Graziouse (YMCA of LI); Eileen Knauer (YMCA of LI); Yvonne Spreckels (Stony Univ Hospital); Patricia Gremillion-Burdge (Western Suffolk BOCES); Susan Kessler (Western Suffolk BOCES); Marilyn Fabbriante (St. Charles Hospital); Laurel Jansen Breen (St. Joseph's College); Lisa Benschcott (Stony Brook University); Theresa Jacobellis (Good Sam Hospital); Juliet Frodella (Eastern LI Hospital); Pat Kiernan (Eastern LI Hospital); Nancy Copperman (NS/LIJ Health System); Anne Little (Asthma Coalition of LI/American Lunch Assoc of NE); Stanford Guan (SC Health Dept); Demetrios Kalenas (Peconic Bay Medical Center); Samantha Vigliotta (Peconic Bay Medical Center); Kristie Golden (Stony Brook Medicine – Dept of Psychiatry); Janine Logan (NSHC).

**Meeting began with Intros around room and an update on group's progress.** - Priority selected – Prevent Chronic Diseases – with two focus areas:

Reducing obesity in children and adults

Increasing access to quality preventive care and chronic disease management programs in clinical and community settings

(addressing mental health/substance abuse service needs woven into focus areas)

Nassau group selected same priority and focus areas

**Coalition building phase now active.**

Possible resource is InsightFormation – company provides software and web-based tracking, data collection and management. sets up like a dashboard with access to approved users; everyone can check in in real time. Help coalitions determine measurable objectives for a chosen goal/priority that are reasonable to obtain. At very local level, need boots on the ground – so advice is to divide work among group members.

Cost is about \$400 - \$500 per month per user – to purchase perpetual license, plus cost for initial site set up, training, reports, etc. about \$20,000

InsightFormation studied NY's Prevention Agenda site and mandate and will offer FREE webinar on June 13 from 3 – 3:30 p.m. Notice and call in info to follow.

3. Some innovative programs/developments in the news and already mentioned by some group members - **a beginning inventory:**

- **School Gardens** – cropping up on LI, especially East End, to promote hands-on learning as original objective, but indirectly healthy eating – Edible School Garden Group (Annie Bliss) nonprofit helps organize school gardens – some funding from Whole Foods
- **Mental health and children** – recent CDC report found that 1 in 5 kids has mental health issue – kids from all backgrounds and socioeconomic status afflicted with conditions from anxiety to depression to serious conduct disorders. Cost nation \$247 billion annually to treat, not to mention how conditions deprive children from reaching full potential
- **Project Fit America** – five elementary schools in Riverhead will get new fitness program complete with new athletic equipment through this California-based program. First school district in the NY state to get the program. Programs are in 870 schools in 42 states. Project Fit is focused on preventive health care and works with hospitals to promote its programs, which are aimed at childhood obesity and general fitness. (Stacy Cook exec director)
- **SBIRT - HANYS** participates as a member of the NYS SBIRT project, which has a goal of expanding behavioral health screening and intervention statewide. OASAS teamed up with HANYS to offer educational program in three cities – NY, Albany and Rochester.
- **Social Prescriptions** – NUMC just launched new service that allows doctors to prescribe basic resources like food, heat, child care and transportation just like they do with medicine. Student advocates fill the prescriptions by connecting patients with resources in the community such as food banks, utility assistance, legal assistance, child care and early intervention programs for children. Program called Health Leads. Hofstra University students (social work???) are the advocates (social pharmacists) who will connect patients/families with resources. Program recognizes that access to nutrition, assistance with electric bills all part of improving patient's health – program most helpful to low-income families. HITE Site useful here. (SEE ATTACHED ARTICLE)
- **Mental Health Parity** – ACA will provide health coverage for 30 million Americans, including six to 10 million people with mental illness, but key details about the insurance exchanges' essential health benefits and mental health parity provisions are needed. Additionally, the Mental Health Parity and Addiction Equity Act signed into law in 2008 has been awaiting final regulations. Policy areas in which the NSHC could have a direct role. Additionally, President Obama has committed to establishing a national dialogue on mental health with a focus on young

people – three-quarters of mental illness appear by age 24; yet less than half receive treatment. Obama proposes “Mental Health First Aid” training to help teachers and staff recognize signs of mental illness and refer to treatment, among other initiatives.

- **Food Deserts** – exists on LI. These are federally-designated areas where convenience stores dominate and food banks have become vital lifelines. Adelphi Univ researcher studied issue for 2 years and issued report about food insecurity here right on LI.
- **Perfect Plates Program** – Mather Hospital working with LI restaurants to promote smaller portion sizes. Funded by Healthy Heart Program – NYS DOH.

## **Guest Presenters**

**Eileen Knauer and Tina Graziose from YMCA of LI.** There are 6 Ys on LI. All use evidence-based programs. Past several years wellness initiatives underway – obesity, physical fitness areas.

Healthier Tomorrows Program is a pediatric weight management program – focus on physical activity – program is 2 hours a week (9 – 12 one group; 13 – 16 another group). Dieticians and social workers involved in program. Seen by medical practitioner the first week. Enrollment criteria – BMI 25+.

Fit Kids is a 10-week program

Diabetes Prevention Program (adults) 16 week program (\$150) Program is for those at risk for diabetes or who are pre-diabetic. Goal is to reduce weight by 7% and engage in 150 minutes of exercise each week. This is an evidence-based program. Rochester area has a pilot program with insurers in place that targets children.

Fall Prevention Program for Seniors – work with Suffolk County – reduce falls by 57% in seniors.

**Susan Kessler and Patricia Gremillion-Burdge from Western Suffolk BOCES.**

Healthy Schools NY funded by NYSDOH. Focus on schools that have a high free lunch rate.. BOCES goes in and helps schools with Wellness policies; look at school’s offerings regarding nutrition and physical activity. Need a champion at the schools and/or district to sustain.

WellSat is a service whereby a school’s wellness policy is examined and receives a score. BOCES also provides lots of professional development work. Have contacts with directors of physical education at the schools.

21<sup>st</sup> Century After School Program links with agencies and CBOs in the area. Districts have to apply for this program.

**Anne Little from Asthma Coalition of LI – American Lung Association of the Northeast.** There are pockets of asthma on LI. Work in high-need school districts to help students manage asthma better. Goal is to reduce ER admissions. Partner with hospitals, colleges, agencies in area to provide good resources for asthma management and also work with primary care practices. Encourage evidence-based practices.

**Kristie Golden from Stony Brook Medicine, Dept of Psychiatry and Behavioral Science.** Much of her work has focused on integrating behavioral health services into primary care settings. In the past secured several grants to get idea of such integration off the ground and behavioral person in each practice.

Health care reform is transforming health care and requiring coordinated, integrated care. Behavioral health part of the continuum of care – especially relevant with chronic disease.

Talked about SBIRT and fact that there is now reimbursement for this screening tool.

## **Wrap Up**

**HANYS webinars – June 3, 10, 17 register online at HANYS**

### **CMS Funding Opportunity for Community Innovation**

Round two of health innovation awards – one category of funding focused on models that improve population health through activities that engage beneficiaries, prevention wellness, comprehensive care that extends beyond clinical service delivery setting.

Could we apply as a workgroup? Intent letter due by June 28; app due Aug 15. (This will be discussed at June 25<sup>th</sup> meeting)

We next meet on Tuesday, June 25 from 2 to 4 p.m.