

## Long Island Population Health Improvement Program (LIPHIP) Attendance & Meeting Summary: October 13, 9:30-11:30am

*Member Attendance: See list attached*

<b>Welcome &amp; Introductions</b>	Janine Logan, Nassau-Suffolk Hospital Council/Long Island Health Collaborative welcomes committee members to the September Long Island Health Collaborative Meeting.
<b>LIHC PHIP Establishment and Role</b>	Janine Logan, Nassau Suffolk Hospital Council provides a background on the institution of the Long Island Health Collaborative and Population Health Improvement Program. The Long Island Health Collaborative programs and initiatives belong to members. The role of the PHIP team includes convening key players, building consensus, organizing projects and supporting the needs of members as related to population health strategies.
<b>DSRIP Performing Provider System Partnerships</b>	<p>The Partnership between Population Health Improvement Program and Performing Provider Partnerships continues to flourish. The delivery system reform incentive payment program's (DSRIP) purpose is to restructure the healthcare delivery system by reinvesting in Medicaid program. Program components are based upon achieving specific results in system transformation, clinical management and population health. The goal is to reduce avoidable hospital visits by 25% over a 5 year period. When the PHIP was established, the State asked that PHIPs serve as a resource for the Performing Provider Systems. The PPSs are the entities responsible for creating and implementing the DSRIP project.</p> <p>Communications, Data and Networking events, <i>Building Bridges with the Long Island Health Collaborative</i> will take place in October 2016. The target audience for this event includes: community leaders, faith-based organizations, community-based organizations, care managers,</p>

	<p>discharge planners, ambulatory sites and provider sites who serve higher numbers of Medicaid/Self-pay patients. Building Bridges was established as a follow up event to our CBO summits which were held by the LIHC in February. During the events, participants will have the opportunity to:</p> <ul style="list-style-type: none"> <li>• network with counterpart organizations</li> <li>• discuss and contribute to prioritization of social determinants of health</li> <li>• leave with strong resources, budding partnerships and a comprehensive communication tool featuring HITE and 211</li> </ul> <p>The Nassau County event took place Wednesday October 5 at Hofstra University. 55 organizations were represented. Participants self-categorized their services based on the social determinant of health. 18 participant evaluations have been collected, with more on the way. At this point, survey responses are overwhelmingly positive with participants looking for future opportunities to network. Many new partnerships emerged as a result of this event.</p> <p>In response to qualitative outcomes obtained from the February Summit events, a communication tool was developed for front-line staff members. This tool featured the 211 and HITE resource directory platforms. This tool will act as a reminder for those case managers, discharge planners and professionals who are confronted with questions about accessing community services.</p> <p>The Suffolk County event will be held October 20 at the Riverhead Volunteer Fire Department. Registration is now closed, with registration at maximum capacity: 130 participants registered.</p>
<p><b>Population Health Brainstorming Activity</b></p>	<p>Janine Logan Logan, Senior Director, leads a population health brainstorming activity with the group:</p> <p><i><b>In one sentence, describe what your ultimate, dream scenario, population health goal</b></i></p>

**would be:**

Responses:

- Safe walking in every community
- Ability to disseminate viral health messages
- Improved integration of all health services (mental and physical)
- Knowledges of available resources and services
- All payer claims
- Everybody has access to healthcare
- Stronger voice of community members
- Patient accountability and patient empowerment
- Change culture of preventive medicine
- Improved nutrition training
- Value on preventive healthcare and increased awareness
- CCHL-translating the issues and improving information
- Awareness of health coach role
- Volunteer advocate who provides culturally competent, safe, high quality patient care
- Transportation
- Awareness of resources and active participation
- Health Leads
- Healthy lifestyle habits
- Triple aim: quality, cost, access
- Access to healthy foods
- Technology
- Individualized care
- Preventive care and increased value
- Access and information to community services

	<ul style="list-style-type: none"> <li>• Communication</li> <li>• Follow up care services</li> </ul>
<p><b>LIHC Workgroup: Public Education, Outreach and Community Engagement</b></p>	<p>#ReadyFeet Rally, the subject of the most recent PECE meeting, is the next project to push sign ups to the portal, hopefully starting in early 2017. Together with digital agency Blue Compass, team functionality will be built into the dashboard. This feature will be used to promote an inter-hospital competition among hospital staff and employees. The intention is to spend time at each of the hospitals promoting the program to the staff members, incorporating email and newsletter marketing, paper sign up forms, integrated social media campaigns, and then in-person promotion at individual hospitals. The idea was presented to the Nassau Suffolk Hospital Council's HR Committee Friday September 16, with receptive input and support.</p> <p>LIHC members agree that positive outcome data will be important to demonstrate the value and success of the Are You Ready, Feet? <sup>TM</sup> Campaign. Partners will continue to promote use of the portal through networks.</p>
<p><b>LIHC Workgroup: Complete Streets/Nutrition and Wellness</b></p>	<p>The Complete Streets/Nutrition and Wellness workgroup is working to identify synergistic programming within two grants: Creating Healthy Schools and Communities, NYS DOH and Eat Smart, New York through the USDA. The workgroup would like to leverage existing partnerships through the LIHC/PHIP membership, especially among those who are working within the target communities focused upon within each grant.</p> <p><b>Creating Healthy Schools and Communities:</b> <i>Grant Partners: Western Suffolk BOCES, Sustainable Long Island, Stony Brook Medicine</i></p> <p>Five-year (2015-2020) public health initiative to reduce major risk factors of obesity, diabetes, and other chronic diseases in high-need school districts and associated communities statewide. Goal: to implement mutli-component evidence-based policies, place-based strategies, and</p>

	<p>promising practices to increase demand for and access to healthy, affordable foods and opportunities for daily physical activity. Targeted communities: Brentwood, Central Islip, Southampton/Shinnecock Indian Nation, Wyandanch and Roosevelt</p> <p><b>SNAP-Ed Eat Smart New York (ESNY) USDA:</b> <i>Grant Partners: Cornell Cooperative Extension (Nassau and Suffolk), Family Residences and Essential Enterprises (FREE)</i></p> <p>Five-year (2014-2019) community-based nutrition education and obesity prevention program to reduce major risk factors of obesity, diabetes, and other chronic diseases in high-need school districts and associated communities statewide. SNAP-Ed ESNY utilizes a variety of hands-on education strategies in the community and partnering agencies. Goal; to implement comprehensive multi layered evidence based strategies: improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans and the associated USDA Food Guidance System, MyPlate.</p> <p>The Complete Streets/Nutrition and Wellness workgroup is co-chaired by Nancy Copperman, Northwell Health and Zahrine Bajwa, Cornell Cooperative Extension. The focus has been on bridging community partnerships, particularly in various grant projects that are being led on Long Island: Creating Healthy Schools and Communities, NYS DOH and Eat Smart NY, ESNY, USDA. The workgroup is comprised of a diverse group of professionals with expertise in nutrition, environmental sustainability, obesity, walkability and beyond.</p> <p>On November 9, 2016, grant-partners will present a unified presentation outlining the parallels between each grant program, specific projecting that is occurring within select communities on Long Island and opportunities for partnership within each program.</p>
<b>Cultural Competency/Health Literacy</b>	Sarah Ravenhall, Program Manager reports the cultural competency/health literacy vendor

**Workgroup**

subgroup, comprised of LIHC members and CCHL umbrella workgroup members of Suffolk Care Collaborative have been meeting to explore locally based vendors with the expertise and capability to develop a tailored CCHL curriculum and host a training for Train the Trainer (TTT) Organizational Leads who will then be able to train the workforce at a limitless number of sessions throughout Long Island. This curriculum will be geared toward community based organizations, social service organizations, local health departments and beyond.

After sending an RFP to five vendors, we received two competitive and high quality proposals from 1199 Training and Employment Fund and Hofstra's National Center for suburban studies/Health Equity institute. After weighing each program, the subgroup decided to move forward and offer the lead to Hofstra University. Martine Hackett will be leading the project.

Martine Hackett is Assistant Professor of Health Professions at Hofstra University. She has a wealth of experience in related trainings, notably taking the lead on a component of the University of Albany's Advancing Cultural Competence program "Addressing Suburban Structures: Health and Latino Communities on Long Island". Martine will be leading a Train the Trainer Organizational Lead session on Monday November 7<sup>th</sup>. This session will be a full-day, 7.5 hour session. Post-session, TTTs will come back to their organization to train internal employees. They will leave the program with all the tools they need to facilitate either a 7.5 hour TTT session, or a 2 hour staff session. In addition, they will be asked to facilitate outside trainings within partner organizations. The specifics of this commitment will depend largely on the capacity of the organization. Having a TTT on-site becomes an asset to the organization as they are able to provide this program, free-of-cost (aside from overhead), for their community partners. The PHIP team will be responsible for program logistics and providing support to the TTT trainers and connecting TTTs to organizations who request trainings.

	<p>The PHIP and two performing provider systems are sharing 30 spots. There will be opportunity for future trainings in 2017. Program registration is closed, with 41 final applicants. The workgroup will review applications to determine who will be accepted to the program based on reach and access to vulnerable populations. Once we have a core-group trained, we will set up and host additional trainings.</p> <p>Martine’s training style is interactive and multi-modal. Components will include:</p> <ul style="list-style-type: none"> <li>• Health disparities specific to Long Island</li> <li>• Hot spotting</li> <li>• Overview of select zip codes</li> <li>• Story maps</li> <li>• Self-reflective piece</li> <li>• Unconscious bias</li> <li>• Health Literacy (spoken and written)</li> <li>• Teach back method</li> </ul> <p>Dr. Lisa Benz-Scott, Stony Brook University suggests the LIHC academic partners discuss plans to lead workforce development programs at the community level on Long Island.</p>
<p><b>Behavioral Health Workgroup</b></p>	<p>The first activity led by the Behavioral Health workgroup surrounded enhancement of activities scheduled during Mental Health Awareness week. Anne Marie Montijo, Association for Mental Health and Wellness and Rachel Priest, Mental Health Association of Nassau County co-chair the Behavioral Health workgroup.</p> <p>Workgroup members planned and promoted a walking event at Sunken Meadow Park on October 6, 2016 during Mental Health Awareness week.</p> <p>Dr. Ruth Schim, Vice Chair of Education and Faculty Development and Chief of Outpatient</p>

	<p>Psychiatry services at Lenox Hill Hospital led a didactic workshop on the Social Determinants of Mental Health on Tuesday October 4. This event was hosted by the Association for Mental Health and Wellness and co-sponsored by Suffolk Care Collaborative and Nassau-Queens PPS. LIHC workgroup members: Anne Marie Montijo, Association for Mental Health and Wellness; Janine Logan, Nassau-Suffolk Hospital Council and Susan Jayson, Suffolk Care Collaborative served as panelists post-program.</p>
<p><b>LIHC Workgroup: Data</b></p>	<p>As a regional PHIP, one of the services provided to member organizations is data collection, analysis and reporting. In August, Michael Corcoran, Data Analyst presented the first part, mental health, of a two-part data presentation on Behavioral Health using data from the Conference of Local Mental Hygiene Directors, Prevention Agenda Dashboard and SPARCS Database. Michael presents the second part of this presentation, on substance abuse, to the attendees. All data presentations are made available on the <a href="http://lihealthcollab.org">lihealthcollab.org</a> website.</p> <p>Dr. Bruce Berlin, President, Suffolk County Medical Society, suggests we remind partners that when reviewing analysis we must consider the inherent limitations and exclusions to data. The PHIP staff members agree that it would be beneficial to make that remark before data presentations begin.</p> <p>A third analysis of the LIHC Community Member Survey will be conducted in late October. Please continue to distribute the survey and return copies to our office before mid-October.</p> <p>Michael Corcoran, Population Health Improvement Program reports ongoing use of the LIHC Wellness Portal. This voluntary survey tool was developed to determine the efficacy of community health program being run by partner organizations. Kim Whitehead, Population Health Improvement Program, is available to assist those organizations looking for a hands-on demonstration on how to use the Wellness Portal. Please contact the PHIP offices if you are</p>



	interested in setting up a date for this hands-on training. Bill Redman, Stony Brook University, provides phenomenal technical support to those utilizing the portal.
<b>Adjournment</b>	<p>The next LIPHIP Meeting is scheduled for: November 9, 2:30-4:30pm 1393 Veterans Memorial Highway, Large Meeting Room, Hauppauge, NY 11788</p> <p>Future meetings will take place in 1393 conference room-same business park in Hauppauge, different building to accommodate membership growth. We are incredibly thankful for all that our members do to drive LIHC initiatives.</p>

Lawrence Eisenstein, MD, MPH, Nassau County Health Department, Health Commissioner; Cara Montesano, Stony Brook Medicine, Dietitian; Susan Jayson, Suffolk Care Collaborative, Director of Behavioral Health; Ilene Corina, PULSE Center for Patient Safety; Bruce Berlin, MD, Suffolk County Medical Society, President Elect; Laurel Janssen-Breen, St. Joseph's College, Professor of Community Health Nursing; Peggy Bushman, Temp Positions, Account Executive; Michael Corcoran, Nassau-Suffolk Hospital Council, Data Analyst; Patricia Gilroy, Catholic Health Services, Manager, Community Benefits; Chris Hendriks, Catholic Health Services, Vice President, Public & External Affairs; Afrin Howlander, Suffolk Care Collaborative, Community Engagement Manager; Doreen Guma, Time to Play Foundation, Founder; Erika Hill, Sustainable Long Island, Senior Program Coordinator; Kenneth Kataria, Options for Community Living, Care Coordinator; Karyn Kirschbaum, WSBOCES, School Health Policy Specialist; Janine Logan, Nassau-Suffolk Hospital Council, Senior Director; Karla Mason, St. Catherine of Siena, Public & External Affairs; Anne Marie Montijo, Association for Mental Health and Wellness, Deputy Director for Strategic Initiatives; Sarah Ravenhall, Nassau-Suffolk Hospital Council, Program Manager; Kim Whitehead, Nassau-Suffolk Hospital Council, Communications Specialist; Tavora Buchman, PhD, Nassau County Health Department; Celina Cabello, Nassau County Department of Health, Epidemiologist; Monica Caravella, Farmingdale State College, Assistant Professor of Nursing; Gail Carlin, South Nassau Communities Hospital, Director of Community Relations; Judith Clarke, Hudson River Health Care; Trevor Cross, HRH Care, Community Manager; Ellen Higgins, Suffolk County Department of Health MICHC Program; Joseph Lanzetta, Mercy Medical Center, Director of Planning and Community Health; Linda Mermelstein, MD, MPH, Suffolk County Department of Health, Chief Deputy Commissioner; Adesuwa Obasohan, Suffolk County

Department of Health, Office of Mental Health, Health Program Analyst I; John Perkins, St. Charles Hospital, Physician Liaison; Gina Shalhoub, Smithtown Youth Bureau, Community Relations Specialist; Vincent Strynkowski, Society of St. Vincent; Luis Valenzuela, Health Education Project/1199 SEIU; Esperanza Viera, Good Samaritan Hospital, Community Health Educator; Lisa Zimmerman, Evolve Wellness, Health Coach; Matthew Neebe, Horizons Counseling and Education Center, Program Director; Jeanine Stuart, SUNY Farmingdale; Greg Benavides, SUNY Farmingdale, Sofia Gondal, Suffolk Care Collaborative, Community Engagement Liaison; Bryan Stengel, Northwell Hospital, Dietetic Intern; Lianne Budd, Stony Brook, Dietetic Intern; Shannon Kearney, Stony Brook, Dietetic Intern; Victoria Miranda, Stony Brook, dietetic intern; Brittany DeLaurentis, Stony Brook, Deitetic Intern; Christiann Johnson, TEK systems, Account Manager; Angela Johnson, TEK Systems, Account Manager; Sue Ann Villano, NYCIG, Senior Director; Josephine Connelly Schoonen, Stony Brook Medicine, Director; Lisa Benz Scott, Stony Brook University, Programming and Public Health; Maura Homes, Family First Home Companions, Director of Marketing.