



Long Island Population Health Improvement Program (LIPHIP) Steering Committee Attendance & Meeting Summary: May 25, 2016, 8:30-10:30am

In Attendance:

Bruce Berlin, MD, Vice President, Suffolk County Medical Society; Chris Hendriks, Vice President, Public and External Affairs, Catholic Health Services of Long Island; Janine Logan, Senior Director, Communications & Population Health; Nassau-Suffolk Hospital Council, Inc.; Joseph LaMantia, Chief of Operations for Population Health, Suffolk PPS, Suffolk Care Collaborative; Kevin Dahill, President & CEO, Nassau-Suffolk Hospital Council; Kim Whitehead, Communications Specialist, PHIP, Nassau-Suffolk Hospital Council; Pascale Fils-Aime, Public Health Intern, PHIP, Paula Fries, Chief Operating Officer, Compliance Officer, Association for Mental Health and Wellness; Nassau-Suffolk Hospital Council; Sarah Ravenhall, Program Manager, PHIP, Nassau-Suffolk Hospital Council; Sue-Ann Villano, Senior Director, Client Services, NYCIG RHIO; Tina Graziose, Wellness Director, YMCA of Long Island via conference call.

Welcome & Introductions	Janine Logan, Nassau-Suffolk Hospital Council/Long Island Health Collaborative
	welcomes Steering Committee members to the meeting.
Reports & Updates	Janine Logan, Nassau-Suffolk Hospital Council/Long Island Health Collaborative
	announces that NYS Department of Health funding for the Population Health
	Improvement Program has been extended by one year into January of 2018. The PHIP
	team will be putting together a budget request for the yearlong extension. During this
	year, the focus of the PHIP will be data collection, supporting the State Health
	Innovation Plan (SHIP) and community engagement.
	Sarah Ravenhall, Population Health Improvement Program reports the PHIP meetings
	are following the New York State Department of Health adopted Healthy Meeting
	Guidelines. Adopted policies follow the National Alliance for Nutrition and Activity
	Meeting Guidance.

Website Launch	The LIHC website launched mid-April 2016. K. Whitehead, Population Health
	Improvement Program provides a walk-through of website components and "Are You
	Ready, Feet?™" walking portal. The Public Education, Outreach and Community
	Engagement workgroup has been developing plans for promotion of this platform.
Workgroup Updates: Public	The Public Education, Outreach and Community Engagement workgroup, chaired by
Education, Outreach and	Chris Hendriks, Catholic Health Services of LI, met Friday, May 20. One strategy
Community Engagement	discussed involves promotion of the walking portal and LIHC activities during the
	Marcum challenge, at which thousands of community members attend to run a 5k and
	network with sponsoring organizations. Many LIHC member organizations are signed up
	to host their own table, where LIHC promotional materials will be shared.
	Janine Logan, Nassau-Suffolk Hospital Council/ Long Island Health Collaborative
	advises LIHC members that a Sunset Stroll has been scheduled for July 21, 2016 at
	Jones Beach State Park. The New York Health Commissioner, Howard A. Zucker, has
	been invited to attend this event. Our goal is to engage and invite community members
	to attend this event. Please mark your calendars and plan to walk with the Long Island
	Health Collaborative on this date.
Workgroup Update: Complete	The Complete Streets/Nutrition and Wellness workgroup is working to identify
Streets and Nutrition Workgroup	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.
	Creating Healthy Schools and Communities: Grant Partners: Western Suffolk

BOCES, Sustainable Long Island, Stony Brook University

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 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

SNAP-Ed Eat Smart New York (ESNY) USDA: Grant Partners: Cornell Cooperative Extension (Nassau and Suffolk), Family Residences and Essential Enterprises (FREE) 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. Target communities: in Nassau Roosevelt Uniondale, Glen Cove, Hempstead, Freeport

Post-meeting, LIHC members will receive a link to a Google poll as a way to identify where and within what capacity LIHC members are currently working in target

communities on Long Island. Once results are received, the workgroup will be able to identify and connect potential partnerships; as well as developing a better understanding of where partners are currently working within these high-need communities. Joseph Lamantia, Suffolk Care Collaborative, reports results from this poll may be beneficial in identifying gaps in service or disparities among communities. S. Ravenhall, PHIP will send the poll questions to Suffolk Care Collaborative for review and alignment. **Workgroup Update: Academic** Sarah Ravenhall, PHIP announces the establishment t of the LIHC Activation Engagement Partnership (LEAP) program. Janine Logan, NSHC/LIHC discussed this **Partners** partnership with Steering Committee members during the last meeting and received positive feedback. Committee Description: This committee is comprised of students and community advocates who hold a vested interest in improving access, health equity and social determinants of health care within communities on Long Island. The purpose of this committee is to light a spark in community members around population health and healthy living. Volunteers must be 18 years of age or older. Target Audience: Cross-representation from academic institutions and multidisciplinary fields of expertise on Long Island. Audience may include, but not limited to, those with an expertise or interest in: nutrition, health communication, public health, nursing, medicine, social engagement, peer education, general communications or public relations. **Member Expectations:** Attendance at evening monthly meetings; regular review of participation in activities Goals/Objectives:

Sharing of information through engagement of accessible networks (may include: academic peers, work colleagues, family, friends) and promotion of Long Island Health Collaborative Initiatives and Events

Social Media

Health Fairs

Community Events

Development of new innovative initiatives and projects as applicable

Applicants will be asked to send their resume and statement of interest, at which point
they will be screened and invited to join the partnership. An informational flyer will be
sent out to LIHC members within the next week as an opportunity promotion strategy.

Our hope is to leverage the social media expertise and connections that many youthful
community members have to expand our community engagement reach.

Members of the academic partner workgroup have received the flyer and are promoting to their student networks and partners to recruit members.

Workgroup Update: Cultural Competency/Health Literacy

The PHIP, LIHC, Suffolk Care Collaborative and Nassau Queens PPS are partnering to develop a strategy to increase cultural awareness and linguistic competence within organizations. The Cultural Competency/Health Literacy vendor workgroup is actively meeting to explore CLAS "train the trainer" programs which can be tailored and incorporated within LIHC member organizations. Programs being researched include Adventist Health Care, Cross Cultural Health Care Program, Greater New York Health Association, Health Literacy Partners and Kinkaid Consulting, LLC.

The Cultural Competency Health Literacy Vendor workgroup met May 12, 2016. During

this meeting the group reviewed additional vendors and programs, defined curriculum and talked about next steps.

In April, a survey was sent to community based organizations from CBO summit events and LIHC to explore training preferences, level of commitment and existing assets. Survey results allowed the workgroup to make decisions about the structure and plan for training sessions which are aligned with the needs of participating organizations.

Summary of Survey Results:

Total Survey Responses=23

Do employees of your organization regularly participate in Cultural Competency/Health Literacy training programs?

13-no (**56.5%**); 10-yes (**43.4%**)

Is this training provided by an external vendor or internally within your organization? (N=10 Yes)

7-internally provided; 1 Externally (1199 SEIU); 1 Right at Home University (online program); 1 No response

Are you interested in providing a tailored Cultural Competency/Health Literacy Training program for staff members within your organization?

12-yes (**52.1**%); 5-no; 6-maybe (**26**%)

If your staff were to attend a training session, what is the maximum amount of time they would have allotted to participate?

Flexibility depending on program type-1 respondent

Greater than 3 hours-1 respondent

3 hours- 6 respondents

2 hours-4 respondents

1.5 hours- 3 respondents

Which method of program delivery is most desirable to your organization? Please rank the following in order of importance, where 1 is most important and 3 is least important;

#1-Face to Face (24 points)

#2-Facilitated Live (32 points)

#3-Recorded Webinar (46 points)

The workgroup decided to elicit a locally-based vendor who is familiar with the unique characteristics of the Long Island region. A Request for Proposal will be written and will be sent to four vendors who meet these criteria.

Workgroup Update: Data

Janine Logan, NSHC/LIHC reports the Community Needs Assessment-PHIP Data Workgroup convened on March 30, 2016. During the LIPHIP Data workgroup meeting held on 3/30/16, representatives from Long Island Hospitals and both County Departments of Health convened to collaboratively select the Prevention Agenda Areas for the 2016-2018 Community Needs Assessment Period. Analysis of community member survey data and qualitative data from the CBO summit events, revealed chronic disease to be the most significant Prevention Agenda Priority.

Participants unanimously agreed upon selection of *Chronic Disease* as the Priority Area of focus with (1) Obesity and (2) Preventive Care and Management as the focus areas. The group also agreed that Mental Health should be highlighted as an area of overlay within intervention strategies. This area, Mental Health is being addressed through attestation and visible commitment to the DSRIP, PPS Domain 4 projects (4.a.i,

4.a.ii, 4.a.iii). This selection remains <u>unchanged</u> from the previously selected priority area, however, a stronger emphasis has been placed on the need to integrate Mental Health throughout Intervention Strategies. Janine Logan reports the PHIP team will put together template pieces, at which point the hospitals and Counties will add their organization-specific interventions and strategies. The templates will be complete before June 10, 2016.

Michael Corcoran, PHIP reports a second analysis of the community member survey will be conducted at the end of May, into early June 2016. The LIHC/PHIP data workgroup met Tuesday May 3 at 2:00pm. During this meeting the group discussed ongoing data projects including the status of County Reports, vital statistics and the Community Health Assessment/Community Service Plan template. Michael Corcoran, PHIP reports he has been working closely with the County representatives to develop comprehensive reports for Community Needs Assessment requirements. Michael is meeting weekly with Suffolk Care Collaborative Data Analyst to align with and support the PPS-driven data analysis and methodology.

Sarah Ravenhall, PHIP reports following the Community-Based Organization Summit events in February, qualitative data was collected, and analyzed under the guidance of a data analysis team. Two reports, specific to each County: Nassau and Suffolk were written, and are now publically available via the LIHC website. Report components include: Introduction, Methodology, Summary of Findings, Community-Based Partners, Conclusion and Appendix. Within the summary of findings section, analytic interpretations and participant quotes have been developed. Sarah Ravenhall requests

	LIHC members review and provide feedback.
DSRIP Performing Provider	The LIHC is planning a follow-up event, LI Health Networking Expo, in response to data
System Partnership	outcomes from the February events for September 2016. A planning council will be
	called to action to finalize event details and the day's agenda. LIHC is working in
	partnership with Suffolk Care Collaborative and Nassau Queens PPS to leverage
	community engagement strategies that are taking place across each entity.
Grant Update: Healthiest Cities	Janine Logan, NSHC/LIHC reports she is working with partners to apply for the
and Counties Challenge Prize	Healthiest Cities and Counties Challenge Prize through the Aetna Foundation, American
	Public Health Association and National Association of Counties. The proposed project
	includes enhancement of the Island Harvest Healthy weekend backpack program in
	Westbury and Brentwood. The schools selected to participate in this pilot program
	identify several teens who become physical activity ambassadors. Ambassadors will be
	responsible for integrating basic physical education and nutrition information within
	elementary schools in school districts of high-need. This plan will be piloted in two
	school districts, then expanded upon if the model shows successful.
Adjournment	The next Steering Committee Meetings dates are:
	1. July 26, 2016
	2. September 28, 3016
	3. November 17, 2016
	Meetings will take place at the Nassau-Suffolk Hospital Council Offices in Hauppauge,
	NY.