

2015 Community Service Plan Update and Report

BUILDING ON COMMUNITY INITIATIVES



ORGANIZATION
Mount St. Mary's Hospital and Health Center
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BACKGROUND

Mount St. Mary's Hospital and Health Center is comprised of a 175-bed community hospital, a 250-bed nursing care residence, and a fully-licensed Child Care Center on its campus in Lewiston, NY. It also operates a Neighborhood Health Center clinic in the City of Niagara Falls and an off-site Outpatient Rehabilitation Center. In addition, medical specialties in Otolaryngology, Primary Care, and Orthopedics are offered at facilities on-campus and throughout the community. Mount St. Mary's serves as the Medical Provider for the PACE Program in Niagara Falls.

Staff includes more than 200 physicians with privileges, 300+ RN's and LPN's, 30 allied health professionals and numerous employees in supporting roles. In all, Mount St. Mary's Hospital and Health Center employs more than 1,200 people and has about 250 volunteers.

Mount St. Mary's Hospital was formed in 1907 by the Sisters of St. Francis who came north from Buffalo to care for the sick and the poor. In 1997 the Sisters of St. Francis turned over sponsorship to the Daughters of Charity to continue in their tradition of excellence and service. In 2000 the Daughters of Charity merged with the Sisters of St. Joseph to create Ascension Health. Ascension Health is the largest not-for-profit healthcare system in the nation.

In 2015, the sponsorship of Mount St. Mary's was transferred to Catholic Health of Buffalo.

MISSION

Mount St. Mary's Hospital is sponsored by Catholic Health.

Our Mission: *We are called to reveal the healing love of Jesus to those in need.*

COMMUNITY SERVICE PLAN OVERVIEW

1) **MISSION**

Mount St. Mary's Hospital and Health Center is sponsored by Catholic Health.

Our Mission:

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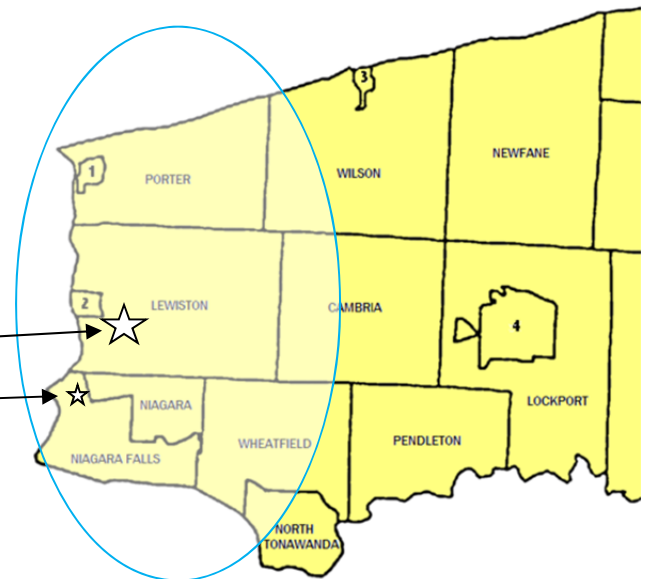
2) **COMMUNITY SERVED**

A) **AREA SERVED:**

The Primary Service Area for Mount St. Mary's is generally described as Western Niagara County and the Town of Grand Island, NY.

Eighty-Five percent of our patients come from this area.

Services are provided at the **main hospital campus** in Lewiston and the **Neighborhood Health Center** in the City of Niagara Falls.



B) **DEMOGRAPHICS:**

Detailed demographics of the community from US Census and other data are included in the report.

C) **EXISTING HEALTH CARE FACILITIES:**

There are two Community Hospitals in our Primary Service Area. **Mount St. Mary's Hospital** at 5300 Military Road in the Town of Lewiston and **Niagara Falls Memorial Medical Center** on 10th Street in the City of Niagara Falls.

3) PUBLIC PARTICIPATION - SURVEY INFORMATION:

Information was obtained mainly through a mail survey to community organizations and churches and individual interviews with hospital volunteers. In addition, Mount St. Mary's surveyed members of its community internally (Dec 2012 and Jan/Feb 2013) through its board of associates' volunteers, St. Francis Guild volunteers, and general hospital volunteers. Information was also gained from an extensive countywide survey conducted by the Niagara County Health Department in mid-2013.

In addition, in moving forward in 2014, we have accessed additional data from a Western New York wide survey conducted by the State University of New York at Buffalo for an applicant for a Delivery System Reform Incentive Payment (DSRIP) initiative. The data has confirmed the results of the recent survey and reinforced the priorities selected. Priorities identified in the Western New York Survey were:

Theme	#	%
Access to Care	1,051	12.8%
Cost of Care	1,044	12.7%
Obesity and Overweight	831	10.1%
Substance Abuse	777	9.5%
Mental Health	745	9.1%
Diet and Exercise	582	7.1%
Cardiac Health	325	4.0%
Education	300	3.7%
Diabetes	254	3.1%
All Other Answers	2,304	28.1%

4) SELECTION OF PUBLIC HEALTH PRIORITIES:

Following the compilation of results from a survey of community leaders and organizations, the information was compiled with the results of similar surveys. Key priorities identified:

Mount St. Mary's Community Survey

Survey of various community stakeholders to identify health issues in the community.

- Priority 1: Chronic Disease (Cardio/Cancer/Stroke/Diabetes)
- Priority 2: Healthy Mothers, Healthy Babies, Healthy Children
- Priority 3: Concern Physical Activity and Nutrition (Obesity)

Niagara County Community Health Survey

Conducted over a period of several months in mid-2013, the Niagara County Department of Health compiled results of surveys received from 1,455 respondents. In response to the question: "When you think about your community, which of the following are you most concerned about?"

- Concern 1: Cancer
- Concern 2: Heart Related Issues (high blood pressure, cholesterol, heart disease, stroke)
- Concern 3: Overweight/Obesity/Weight Management

Niagara County Health Department/Hospitals

Through the direction of the New York State Department of Health, the Niagara County Department of Health joined with hospitals in Niagara County to identify two specific priorities and outline a process to measure outcomes on initiatives. The two initiatives are:

- Concern 1: Reduce Risk of Falls in over 65 population
- Concern 2: Use of Evidence Based Care to Manage Chronic Diseases – Awareness that treating mental health improves chronic disease outcomes

New York State Prevention Agenda

NYS Prevention Agenda Action Plan

- Focus Area 1: Reduce obesity in children and adults
- Focus Area 2: Reduce illness, disability and death related to tobacco use/secondhand smoke
- Focus Area 3: Increase access to high-quality chronic disease preventive care and management in clinical and community settings

Members of the group from Mount St. Mary's who worked on the identification of priorities:

- Barbara Bucci, *Vice President – Patient Care Services*
- Fred Caso, *Vice President – Community Relations*
- Sr. Grace Marie Dunn, *DC, Vice President – Mission Integration*
- Domonic Falsetti, *MD - Chief of Medical Staff*
- Bernadette Franjoine, *Senior Director – Operations*
- Andrea Gaudioso, *Chief Information Officer*
- Barbara Malinowski, *Parish Nurse Coordinator*
- Judith Maness, *President and Chief Executive Officer*
- Honor Martin, *Director – Education and Organizational Development*
- Laurie Merletti, *Senior Director – Quality*
- Russell Previte, *Director of Budget and Reimbursement*
- Deborah Serafin, *Vice President – Human Resource/Chief Human Resources Officer*
- Gary Tucker, *Senior Vice President – Operations/Chief Operations Officer*
- Sr. Nora Sweeney, *DC, Social Worker*

5) DISSEMINATION OF PLAN TO THE PUBLIC

- A) POSTING ON HOSPITAL INTERNET WEBSITE: **YES**
- B) NOTICE IN NEWSPAPERS ON AVAILABILITY: **YES**
- C) AVAILABLE ON REQUEST FROM HOSPITAL FACILITY: **YES**
- D) OTHER: **AWARENESS ON MSMH FACEBOOK PAGE**

6) THREE YEAR PLAN OF ACTION

Mount St. Mary's Community Survey

(ATTACHMENT 2 & 3)

Mount St. Mary's conducted a survey of various community stakeholders to identify health issues in the community.

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Niagara County Community Health Survey

Conducted over a period of several months in mid-2013, the Niagara County Department of Health compiled results of surveys received from 1,455 respondents. In response to the question: "When you think about your community, which of the following issues are you most concerned about (please select three)?"

- Concern 1: Cancer
- Concern 2: Heart Related Issues (high blood pressure, cholesterol, heart disease, stroke)
- Concern 3: Overweight/Obesity/Weight Management

Niagara County Health Department/Hospitals

Through the direction of the New York State Department of Health, the Niagara County Department of Health joined with hospitals in Niagara County to identify two specific priorities and outline a process to measure outcomes on initiatives. The two initiatives are:

- Initiative 1: Reduce Risk of Falls in over 65 population
- Concern 2: Use of Evidence Based Care to Manage Chronic Diseases – Awareness that treating mental health improves chronic disease outcomes

New York State Prevention Agenda

"Chronic diseases such as cancer, diabetes, heart disease, stroke and asthma are conditions of long duration and generally slow progression. Chronic diseases are among the leading causes of death, disability and rising health care costs in New York State. Specifically, they account for approximately 70% of all deaths in New York State and affect the quality of life for millions of New Yorkers."

- NYS Prevention Agenda Action Plan

- Focus Area 1: Reduce obesity in children and adults
- Focus Area 2: Reduce illness, disability and death related to tobacco use and secondhand smoke
- Focus Area 3: Increase access to high-quality chronic disease preventive care and management in clinical and community settings

7) PROCESS OF IDENTIFYING NEEDS:

Following the tabulation of information received, those involved in developing community education and information programs met to identify priorities.

8) CONSULTING OF INDIVIDUALS:

Mount St. Mary's has more than 250 people serving as volunteers, as well as information from a variety of community leaders.

9) INFORMATION GAPS

Our survey reached out to a wide-array of community organizations. We are a small community and we have a major healthcare facility in the census tract of the community that has the lowest income population and is the most underserved. We work with these individuals as our patients every day. We did not specifically survey our Grand Island area from which we receive about 3% of our patients.

10) DID THE HOSPITAL ADDRESS ALL OF THE NEEDS IDENTIFIED IN THE SURVEY:

No. Some of the identified needs (Veterans care, good schools, economic development, low crime), are issues better handled by others in the community. We are addressing the major issues that we can effectively and efficiently address.

11) OTHER

FINANCIAL ASSISTANCE

Mount St. Mary's has fully reviewed its Financial Assistance Policies and through postings, brochures, inpatient materials, and general awareness has full-time financial assistance counselors available to assist patients in need.

Implementation

The programs that Mount St. Mary's has put in place to address its priorities involve numerous community groups and organizations. Mount St. Mary's will continue to support several health collaborative groups which include community partners, the Niagara County Health Department, academia, and local schools. These partners will be engaged throughout the years in an evaluation process to determine new areas of need or refine current service offerings.

The Need

Niagara County ranks low in NYS Ratings of Counties for Health Outcomes and Health Factors

- **Health Outcomes** **Niagara County is 59 of 62**

Health Outcomes represent the health of the residents of a county

- **Health Factors** **Niagara County is 45 of 63**

Health Factors represent what influences the health of the county

Population Health Statistics

Western New York Community Health Needs Assessment 2014)

Delivery System Reform Incentive Payment (DSRIP) Program - VOLUME ONE

On broad composite measures of health status as framed by the New York State "Prevention Agenda" Western New York does relatively poorly. Across sub-categories of chronic disease, health status disparities, creating a healthy and safe environment, preventing HIV, sexually transmitted diseases and other infectious diseases, promoting mental health and preventing substance abuse, and promoting the health of women, infants and children, the region performs generally below par.

The region's poorest ranking comes in the sub-group for HIV and STDs. However, Erie County and to a lesser extent, Niagara County, account for the bulk of the problem. This includes low rankings for HIV prevention, new cases of HIV, and disparities in HIV rates for Black and Hispanic persons, as well as high rates for gonorrhea, chlamydia and syphilis.

The region also has a relatively low composite ranking for the subgroup for chronic diseases with higher incidences of hospitalization for **complications of diabetes**, complications of juvenile diabetes and for heart attacks. Rates for emergency room visits for asthma and by persons 0-4 years old for asthma were also above average compared with the rest of upstate New York.

For chronic diseases and causal behaviors, a few hotspots appear in the data. Orleans and Niagara County have a very high for percentage of adults who smoke. Genesee County ranked at the bottom compared with both WNY and similar counties statewide for hospitalizations for short-term complications from juvenile diabetes.

Niagara County had a similar ranking with regard to adult diabetes. The region also ranked poorly in the sub-group for promoting a healthy and safe environment with measures for **ED visits as a result of falls**, ED visits due to occupational injuries, and ED visits resulting from assault-related injuries. WNY was also at the bottom in terms of the number of jurisdictions approving the Climate Smart Communities pledge and the proportion of workers who use alternative forms of transportation or work from home.

For promoting mental health and preventing substance abuse the region also did poorly but based on a relatively small number of indicators. WNY had low rankings for age-adjusted suicide rate and for binge drinking.

The composite score for promoting the health of women, infants and children was somewhat better than the others. This score, however, might obscure several other troubling individual indicators. These included bottom rankings among upstate regions for percentage of pre-term births, maternal mortality rate, teen pregnancy, unintended pregnancy, percentage of second births within 24 months of previous pregnancy, and percentage of births to Medicaid enrollees.

Priority 1: Chronic Disease (Cardio/Cancer/Stroke/Diabetes)

Mount St. Mary's conducts a series of free community screenings throughout the year to address the priorities of Chronic Diseases:

Cardiology:	Free Lipid Panel Screening (<i>Attached</i>)
Cancer:	Free PSA Screening, in cooperation with the Board of Associates Men's Volunteer organization (<i>Attached</i>)
Diabetes	Free HgbA ₁ C Screening
Cancer	Free Digital Mammography Screening in cooperation with the Niagara County Cancer Awareness Program (<i>Attached</i>)
Cancer	Smoking Cessation Assistance/Workshops Smoking Prevention Workshops for Teens (HERO) Center for Women: Mommie & Me Tobacco Free

Purpose, Objectives and Audience

- PURPOSE: Decrease Admissions and Re-Admissions
Improve Population Health
Decrease Healthcare Costs
- OBJECTIVE: Awareness, Prevention & Management of Chronic Disease
- ROOT CAUSE: Smoking
Lack of Physical Activity
Poverty/Cost of Quality Food
Environmental Factors
- AUDIENCE: General Population and their Families

Measures to Track Improvements

SEE NEXT PAGE

- Patient Centered Medical Home Data
 - BP Management
 - ACE/ARB Tracking
- Community Lipid Panel Screenings
- Community PSA Screening
- Reduce illness, disability and death related to tobacco use and secondhand smoke
 - Quarterly Smoking Cessation Education Programs

Priority 1: Chronic Disease (Cardio/Cancer/Stroke/Diabetes)

TRACKING

- BP Management: Tracked for 100% of Primary Care Patients. Goal= <140/90

BLOOD PRESSURE SCREENINGS	2013	2014	YTD2015
Patients/# < 140/90	50%	52%	54%

Efforts by staff include Medication Management, Blood Pressure Followup, and Obesity Education

- ACE/ARB Tracking: Ordered on 100% of Primary Care Patients with Hypertension

ACE/ARB TRACKING	2013	2014	YTD2015
ACE/ARB Tracking	67%	70%	69%

Efforts include Medication Management, Notification of Patient's Primary Care Physician, and Tracking

- Community Lipid Panel Screenings

Conducted for 14 years in the month of February

LIPID PANEL SCREENINGS	2002		2015
Lipid Panel Screening	450		200

Comments show that patients are now getting this test performed routinely through Primary Care. Heart and Diabetes education information now offered as part of screening. The hospital also provides a free heart-healthy breakfast for attendees following the tests since those attending were fasting prior to the test.

- Community PSA Screening

Conducted for 16 years in the month of June (Father's Day Week)

PSA SCREENINGS	2002		2015
PSA Screening	400+		159

Comments show that patients are now getting this test performed routinely through Primary Care.

- Chest Pain Center Accreditation

- We Track 100% of Acute Myocardial Infarction (AMI) patients for Aspirin on arrival
- We track 100% of Acute Myocardial Infarction (AMI) patients for Fibrinolytics (TNK) given 30 minutes or less
- We monitor Door (Arrival) to EKG on chest pain patients to strive for <10 minutes
- Conduct community education programs in February during Heart Month

AMI: STEMI/TNK	2012	2013	2014	YTD 2015
Total STEMI	25	27	26	22
TNK	21	18	19	15
Door to Needle (TNK) Median Time	27.5 min	25.5 min	21 min	27 min

- Stroke Center Designation
 - We track 100% of all Ischemic, Transient Ischemic Attack & Hemorrhagic stroke patients on all of the required American Heart/Stroke Associations Achievement & Quality Measures. This is also a mandatory requirement to maintain our NYSDOH Stroke Designation status.

Stroke Core Measures based on "Get With The Guidelines"			
Measure	2013	2014	2015
Arrive by 2 hours, treat with tPA by 3 hours	100%	100%	100%
Early antithrombotics	98%	100%	99%
VTE Prophylaxis	93%	100%	199%
Antithrombotics @ d/c	99%	99%	98%
Atrial Fibrillation patients d/c on anticoagulants	100%	97%	100%
Educated on smoking cessation	100%	100%	100%
d/c on statins	98%	100%	99%
Dysphagia Screening	88%	97%	92%
Stroke Education	94%	97%	99%
Assessed for Rehabilitation Services	100%	98%	100%
NIHSS upon arrival	89%	88%	91%

- We monitor 100% of the essential TIME TARGETS to be utilized in order to administer the lifesaving drug Alteplase (IV- tPA) in less than 60 minutes from arrival.
 - Conduct community education programs in May as part of Stroke Awareness Month. Includes community presentations.
 - Conduct ongoing education for EMS providers (including volunteer fire company transport crews) to reinforce pre-notification of ER if transporting a potential stroke patients which activates the stroke protocol.
- Reduce illness, disability and death related to tobacco use and secondhand smoke
 - 100% of patients receive a smoking assessment; all patients at all clinics
 - Patients are referred for followup assistance per assessment
 - 100% of patients identified as smokers are provided information on the NYS Quitline and other information sources. The visit summary also includes information.
 - Low-Dose Chest CT Screening offered for long-term smokers
- Quarterly Smoking Cessation Education Programs
 - Programs are advertised in local news media for awareness

Priority 2: Healthy Mothers, Healthy Babies, Healthy Children

Mount St. Mary's conducts a series of community programs throughout the year to address the priorities of Healthy Mothers, Healthy Babies, Healthy Children

Moms Net™ is a network of agencies that provide education services and referrals to women in Niagara County. It is designed to help mothers and mothers-to-be, to learn more about health and wellness during and after their pregnancy. Our mission is to provide the tools and access to education to assist mothers to live healthier lives. The "Moms United Education Group" offers free education designed to help new moms and moms-to-be to learn more about health and wellness during their pregnancies and after the birth of their babies.

Moms Net™ Collaborative Partners include the following:

- ☒ Mount St. Mary's Center for Women
- ☒ Catholic Health Home Care Services
- ☒ Catholic Charities WIC Program
- ☒ Family & Children's Services
- ☒ Mount St. Mary's Neighborhood Health Center
- ☒ Niagara University Department of Nursing
- ☒ Help Me Grow Initiative
- ☒ CareNet
- ☒ Catholic Charities of WNY
- ☒ The Northpointe Council, Inc.
- ☒ Healthy Families Niagara
- ☒ Niagara County Dept of Health
- ☒ Trocaire College Dept of Nursing

HERO's Collaborative Partners include the following:

- ☒ Niagara University Departments of Nursing and Biology
- ☒ Daemen College Department of Physical Therapy Education
- ☒ The Northpointe Council, Inc.
- ☒ Dr. Shawn Ferguson, Rainbow Pediatrics (Clinical Moderator)
- ☒ Catholic Academy of Niagara Falls
- ☒ Trocaire College Department of Nursing School
- ☒ De Sales Catholic School, Lockport, NY
- ☒ St. Peter's Roman Catholic School, Lewiston, NY
- ☒ St. Mary's Hospital and Health Center, Departments of:
 - Education and Organizational Development
 - Mission Integration (Sr. Mary Kay Tyrell at HL&S)
 - Rehabilitation and Sports Medicine
 - Community Relations
- ☒ The Niagara County Department of Health
- ☒ Niagara University College of Education
- ☒ Catholic Charities of Western New York
- ☒ The Buffalo Diocesan Catholic Schools
- ☒ Fidelis Care New York
- ☒ The Niagara Charter School
- ☒ Niagara Catholic Middle & High Schools
- ☒ Lewiston-Porter School District

Purpose, Objectives and Audience

- **PURPOSE:** Improve Birth Outcomes and Educate the Public
- **OBJECTIVE:** Screening and Support for Moms and Children
Provide Referrals to Other Organizations
- **ROOT CAUSE:** Cycle of Poverty
Age of Moms
Cultural and Societal Norms
- **AUDIENCE:** Women of Child-Bearing Age/Children

Measures to Track Improvements

SEE NEXT PAGE

- Screenings of Women at Center for Women
- Clinic Vaccination Information
- Total Number of Early Elective Deliveries (≥ 37 & <39 weeks)
- Compliance with HANDS (Handling All Neonatal Deliveries Safely) Program

Priority 2: Healthy Mothers, Healthy Babies, Healthy Children

TRACKING

- Screenings of Women at Center for Women
 - Screenings Offered for Second Hand Smoke

For 100% of patients, abuse and safe living environment questions, as well as smoking status, are asked and documented on the progress note at the office visit. This now includes second-hand smoke. (Tracked in eCW)
 - Mommies and Babies Program

The **BABY & ME – Tobacco Free** is a smoking cessation program created to reduce the burden of tobacco use on the pregnant and post-partum population. Women who quit smoking are less likely to have premature and low-birth weight babies and reduce the damaging effect of secondhand smoke on their children. The program’s design has proved effective in decreasing the number of women who smoke during and after pregnancy.

Pregnant women are referred by their physician, clinic, or health department or word of mouth to contact their local site and complete an application. The local site arranges for the woman’s first appointment during which she receives information about the program and an initial intake session is held. Each participant receives at least four prenatal cessation counseling sessions, support, and carbon monoxide (CO) monitoring, usually during a regular prenatal visit. To verify CO monitor test results, sites may conduct random saliva tests as necessary.

After the birth of the baby, the mother returns monthly to continue CO monitoring and, if smoke-free, she receives a \$25 voucher for diapers for up to 6-12 months postpartum, depending on program funds.
 - Safe Environment/Domestic Violence
 - MSMH screens 100% of patients, including ER, Clinics, and Admissions
 - Patients are referred for assistance when needed
 - Domestic Violence Training provided at Neighborhood Health Center
 - “Feeling Safe” Domestic Violence Training for NHC Social Worker and MSMH ER staff
- Clinic Vaccination Information
 - Provided to 100% of Patients Immunizations

IMMUNIZATIONS	2013	2014	YTD 2015
Adult	1,686	1,462	782
Pediatrics	2,561	1,812	985
TOTAL	4,247	3,274	1,767

- Total Number of Early Elective Deliveries (≥ 37 & <39 weeks)
 - TOTAL FOR JAN 2014 0
 - TOTAL FOR JULY 2014 0
 - TOTAL FOR JAN 2015 0
 - TOTAL FOR JULY 2015 0

- Compliance with HANDS (Handling All Neonatal Deliveries Safely) Program
 - COMPLIANCE RATE FOR JAN 2014 100%
 - COMPLIANCE RATE FOR JULY 2014 100%
 - COMPLIANCE RATE FOR JAN 2015 100%
 - COMPLIANCE RATE FOR JULY 2015 100%
- Breastfeeding Participation
 - Community Outreach
 - Mount St. Mary's Hospital made a decision in 2013 to further the quality of its services and care to their maternity patients by hiring a dedicated Board Certified Lactation Manager for Center for Women. Knowing that breastfeeding is a public health priority, recognizing that many recent studies clearly show breast milk has a major impact on human development, and on overall health; our hospital can move ahead to start meeting or exceeding state, and federal standards.
 - One of these goals is the Healthy People 2020 target goal of reaching an 81.9% breastfeeding initiation rate. (MICH-21 Increase the proportion of infants who are breastfed)

2014

- Buffalo Breastfeeding Picnic 400+ participants/community members walked by our table.
- Niagara Falls Breastfeeding Picnic 500 participants/community members walked by our table.

2015

- Buffalo Breastfeeding Picnic 450 participants/community members walked by our table
- Niagara Falls Breastfeeding Picnic 350 participants/community members walked by our table

(Numbers Calculated from Breastfeeding Coalition & Erie/Niagara County WIC Program)

- The hospital lactation specialist, hosted 48 women (Jan-July 2015) this year at support group meetings in our education room.
- 531 women have called, texted, emailed or been called with questions

Recent Monthly Statistic Reports for Lactation Services

Sept 2015

- 4 women attended support group
- 15 patients were educated in their hospital rooms
- 45 phone calls, text messages, or emails were made answering new mothers concerns
- 64 Total Contacts

Oct 2015

- 7 women attended support group
- 15 patients were educated in their hospital rooms
- 50 phone calls, text messages, or emails were made answering new mothers concerns
- 10 public outreach (persons took information from table)
- 82 Total Contacts

Note: Numbers do not reflect in-hospital patient assessments, or private office consultations.

Priority 3: Concern Physical Activity and Nutrition (Obesity)

CHEERS Program (Choosing Healthy Eating and Exercise Routines for healthier life)

Childhood obesity is a health problem reaching epidemic proportions throughout the United States. The Program teaches children a simple healthy eating plan, which they can easily internalize and use throughout their lives. By engaging parents in the Program sessions and homework assignments, their participation in the selection of foods, exercise and other aspects of the curriculum can be encouraged and supported.

CHEERS' Collaborative Partners include the following:

- ☑ Mount St. Mary's Hospital Departments of:
 - Education
 - Nutrition Services
 - Diabetic Educators
 - Rehabilitation and Sports Medicine
- ☑ Niagara University Faculty & Staff
- ☑ Cornell Cooperative Extension
- ☑ The Northpointe Council, Inc.
- ☑ Lori Caso, Lori & Friends Cooking Television Show/Neighborhood Health Center

Purpose, Objectives and Audience

- **PURPOSE:** Decrease Co-Morbidities due to Obesity
Early Intervention for Mild-to-Moderate Obesity
- **OBJECTIVE:** Educate Public on Risks and Causes of Obesity
Establish Care Plans
Educate the Public on Healthy Eating and Activities
- **ROOT CAUSE:** Cycle of Poverty
Cultural & Societal Norms
Move to Technology/Limited Physical Activity
Knowledge Deficit
- **AUDIENCE:** General Public

Measures to Track Improvements

SEE NEXT PAGE

- **Concern Physical Activity and Nutrition (Obesity)**
 - Diabetes Education Data
 - BMI Report
 - Coordination of CardioCraze Community Walk
- **Increase access to high-quality chronic disease preventive care and management in clinical and community settings**
 - Reduce Obesity in Children and Adults
 - CHEERS Program
 - Outreach to Heart, Love & Soul

Priority 3: Concern Physical Activity and Nutrition (Obesity)

TRACKING

- Physical Activity and Nutrition (Obesity)

- Diabetes Education Program is Accredited by The American Association of Diabetes Educators
- Host for monthly Diabetes Support Group
- Conduct annual screening programs
- Conduct programming on healthy eating at Neighborhood Health Center
- Diabetes Education Data

Population	2013	2014	Types of DM	2013	2014	Special Needs	2013	2014
≥ 65 yrs	46	54	T1DM:0-18 yrs	0	0	Visually Impaired	0	0
45-64	79	106	T1DM ≥ 19	0	2	Hearing Impaired	0	0
19-44	16	12	T2DM 0-18	0	0	Low literacy	0	0
<19	0	0	T2DM > 19	127	144	ESL	0	0
Total class	74	70	GDM	9	7	Cognitive	0	0
Total individual	67	102	Pre	4	19			

Gender	2013	2014	Race/Ethnicity	2013	2014	Guests	2013	2014
Male	56	82	White	123	161	Follow-ups	32	72
Female	85	90	African American	12	10	Renal/MNT	13	30
			Latino/Hispanic	0		Pre DM class	0	0
			Asian	1	0	Guests- Pre DM	0	0
			Am.Indian/Alaskan	5	1	Medicare	8	7

- BMI Report (100% of Primary Care Patients)
 - >40 = Education, Annual Phone Messages to encourage positive behavior

BMI	2013	2014	YTD 2015
BMI Patients/# >40	3,425	3,428	3,204
BMI >40	81	129	504

- Portal Postings for Diabetes information @ Primary Care Clinics
- Patients with BMI over 40 provided education

- Coordination of CardioCraze Community Walk
 - Community Awareness initiative.
 - Participants in 2011 = 120
 - Participants in 2014 = 180

- Increase access to high-quality chronic disease preventive care and management in clinical and community settings

- Reduce Obesity in Children and Adults

- CHEERS Programs

- 8/17-8/21, 8/27, 11/7
 - 8/17 – 13 registered
 - 8/18 – 22 registered
 - 8/19 – 23 registered
 - 8/20 – 19 registered
 - 8/21 – 20 registered

- Outreach to Heart, Love & Soul Food Kitchen

- Care Coordination
- Nutritionist Offered in Care Plans
- NHC Health Fairs (i.e. BPs at St. John's AME; Doris Jones Ctr)

Reporting

FULL TRACKING REPORT AVAILABLE

November 2013 = 10.6% Baseline

July 2013

65 years of age + = 302 Falls over 65 years = 49 Total ED visits = 1,549 $49/302 = 16.2\%$

January 2014

65 years of age + = 215 Falls over 65 years = 44 Total ED visits = 1,236 $44/215 = 20.5\%$

July 2014

65 years of age + = 268 Falls over 65 years = 46 Total ED visits = 1,550 $46/268 = 17.2\%$

February 2015

65 years of age + = 182 Falls over 65 years = 37 Total ED visits = 1,113 $37/182 = 20.3\%$

June 2015

65 years of age + = 252 Falls over 65 years = 49 Total ED visits = 1,540 $37/182 = 19.4\%$

Priority II – Increase Access to High Quality Chronic Disease Preventative Care and Management in both Clinical and Community Settings

By Dec 2017, Mount St. Mary’s Hospital will promote the use of Evidence-Based Care to Manage Chronic Diseases and increase the percentage of adult patients with chronic disease who receive mental health screening from the current level of approximately 10% up to 50%.

This will be accomplished by:

FULL TRACKING REPORT AVAILABLE

- Staff Education
- Work with the P2 Collaborative and the Care Coordinators it provides to conduct PHQ2 Screening
- Work with Primary Care Providers
- Track Patient Status following interventions

By Jan 2014

- | | |
|--|------------------------------|
| 1) Review policies, training and tools to support screening activity | Completed |
| 2) Document baseline of PHQ2 Assessment Completion | Completed
Baseline of 18% |

By July 2014

- | | |
|---|-------------------------------|
| 1) Review clinical-community linkages that connect patients to follow-up services | Completed |
| 2) Evaluate baseline data (completion of PHQ2 screen) | Completed |
| 3) Track and Monitor and do course correction to build % | |
| 4) 100% of patients screened annually | Conducted by
Nursing Staff |

By July 2015

- | | | |
|---|--------------------|--|
| 1) Review clinical-community linkages that connect patients to follow-up services | | |
| January 2014 = 18% | January 2015 = 27% | |
| March 2014 = 19% | March 2015 = 54% | |
| May 2014 = 19% | May 2015 = 56% | |
| July 2014 = 20% | July 2015 = 64% | |
| Sept 2014 = 22% | Sept 2015 = 70% | |
| Nov 2014 = 26% | | |
| 2) Track and Monitor and do course correction to build % | | |

By July 2016

- 1) Track and Monitor and do course correction to build %

By July 2017

- 1) Track and Monitor and do course correction to build %

By Dec 2017

- 1) Achieve or exceed level of 50% of adult patients with chronic disease who receive
- 2) screening for mental health

COMMUNITY INFORMATION

A. Our Community

Our community is comprised of Niagara County, New York and a portion of Grand Island, which is in Erie County, New York. The following describes Niagara County's demographics and health indicators relative to New York State.

Overall Population = 216,000 (approximately 110,000 are in MSMH Primary Service Area)

- 16% of residents are over the age of 65
- 22% of residents are below the age of 18
- 7% of residents are African American and 2% are Hispanic
- Median Household Income is \$45,545, which is 20% below the state average
- 12% of population is illiterate

Highlights of Health Indicators for Niagara County:

- Niagara County ranks 59th (out of 62 counties) in New York State in "Health Outcomes"
- 15% of residents are considered in poor or fair health
- 26% of residents smoke
- 27% of residents consider themselves obese
- 17% of residents consider their alcohol use as excessive
- 9% of residents are diabetic
- 16% of residents are uninsured
- 83% of residents have been screened for diabetes
- 69% of residents have been screened for mammograms
- 18% of residents believe there is inadequate social support
- 34% of children live in single-parent households

B. Service Area

The Primary Service Area (PSA) for Mount St. Mary's is Western Niagara County and Grand Island, Erie County. The PSA, more particularly, is comprised of the City of Niagara Falls; the townships of Grand Island, Wheatfield, Niagara, Lewiston, Youngstown and Wilson; and the villages of Lewiston, Youngstown and Wilson. The Secondary Service Area (SSA) includes the remainder of Niagara County, most notably the cities of Lockport and North Tonawanda.

C. Market Characteristics – Demographic/Socioeconomic Trends

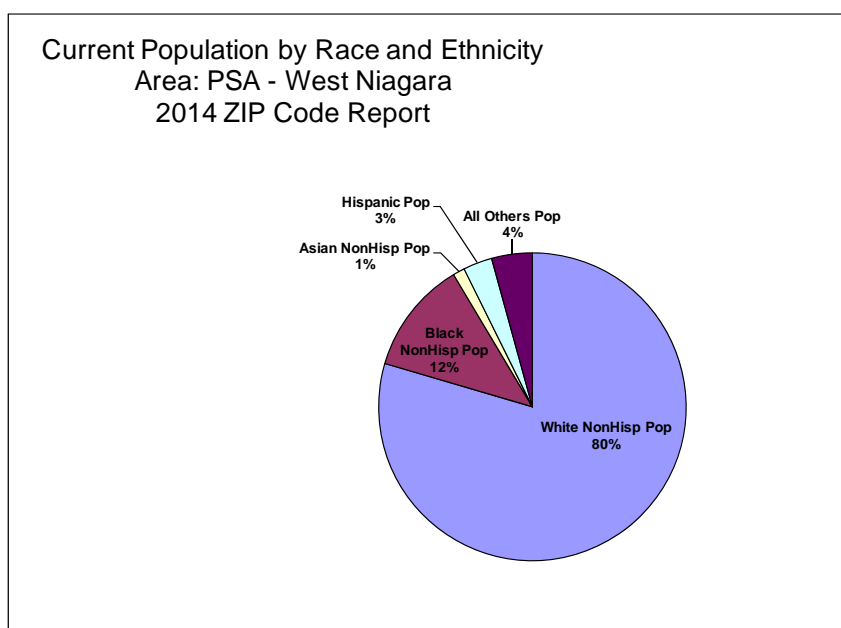
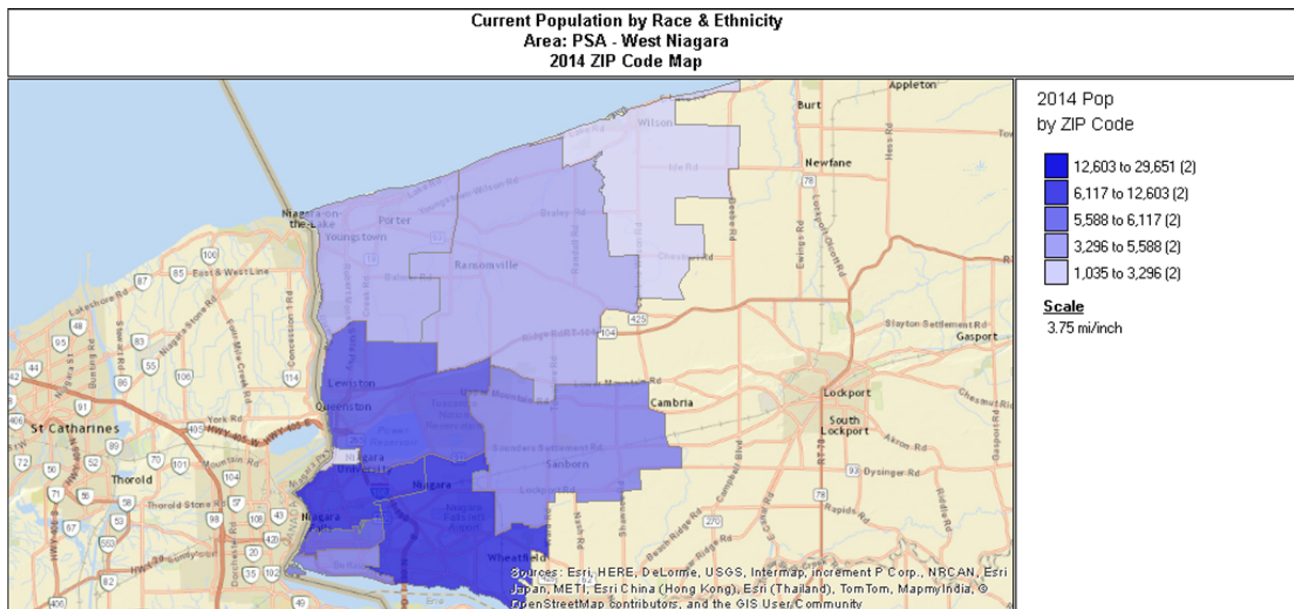
Population – The population growth in our Primary and Secondary Service Areas has been negligible in the past 30 years. The population of the City of Niagara Falls (where 50% of our patients reside) has declined from over 110,000 in 1960, to 55,000 in the 2000 census, to just 50,200 in the 2010 census.

Population Changes in Niagara County:				
Age Cohort	2010	2015	Difference	% Change
	(Current Year)	(Forecast Year)		
0-17	24,898	22,820	-2,078	-8.30%
18-34	26,629	27,483	854	3.20%
35-64	47,754	45,831	-1,923	-4.00%
65+	19,478	20,960	1,482	7.60%

Source: Demographic Forecaster, Thompson Reuters

Market Diversity – Mount St. Mary's market is comprised of predominately Caucasians and African-Americans. The growth in the Hispanic population has been limited to the rural areas.

ZIP Code	ZIP City Name	White		Black		Asian		Hispanic		All Others		
		2014 Population	Non-Hispanic Population	%Across	Non-Hispanic Population	%Across	Non-Hispanic Population	%Across	Population	%Across	Population	%Across
14092	Lewiston	11,254	10,446	92.8%	118	1.0%	119	1.1%	229	2.0%	342	3.0%
14109	Niagara Univ	1,035	899	86.9%	51	4.9%	14	1.4%	43	4.2%	28	2.7%
14131	Ransomville	5,535	5,238	94.6%	39	0.7%	15	0.3%	129	2.3%	114	2.1%
14132	Sanborn	6,117	5,585	91.3%	100	1.6%	23	0.4%	102	1.7%	307	5.0%
14172	Wilson	3,296	3,141	95.3%	23	0.7%	9	0.3%	59	1.8%	64	1.9%
14174	Youngstown	5,588	5,326	95.3%	15	0.3%	41	0.7%	117	2.1%	89	1.6%
14301	Niagara Falls	12,603	7,241	57.5%	3,506	27.8%	278	2.2%	669	5.3%	909	7.2%
14303	Niagara Falls	5,668	3,188	56.2%	1,584	27.9%	70	1.2%	318	5.6%	508	9.0%
14304	Niagara Falls	29,651	26,346	88.9%	1,097	3.7%	521	1.8%	699	2.4%	988	3.3%
14305	Niagara Falls	16,403	9,867	60.2%	5,022	30.6%	115	0.7%	602	3.7%	797	4.9%
		97,150	77,277	79.5%	11,555	11.9%	1,205	1.2%	2,967	3.1%	4,146	4.3%



2014 Demographic Snapshot

Area: PSA - West Niagara

Level of Geography: ZIP Code

DEMOGRAPHIC CHARACTERISTICS

	Selected Area	USA			2014	2019	% Change	
2010 Total Population	98,997	308,745,538			Total Male Population	46,711	46,077	-1.4%
2014 Total Population	97,150	317,199,353			Total Female Population	50,439	49,663	-1.5%
2019 Total Population	95,740	328,309,464			Females, Child Bearing (15-44)	17,900	17,447	-2.5%
% Change 2014 - 2019	-1.5%	3.5%						
Average Household Income	\$56,522	\$71,320						

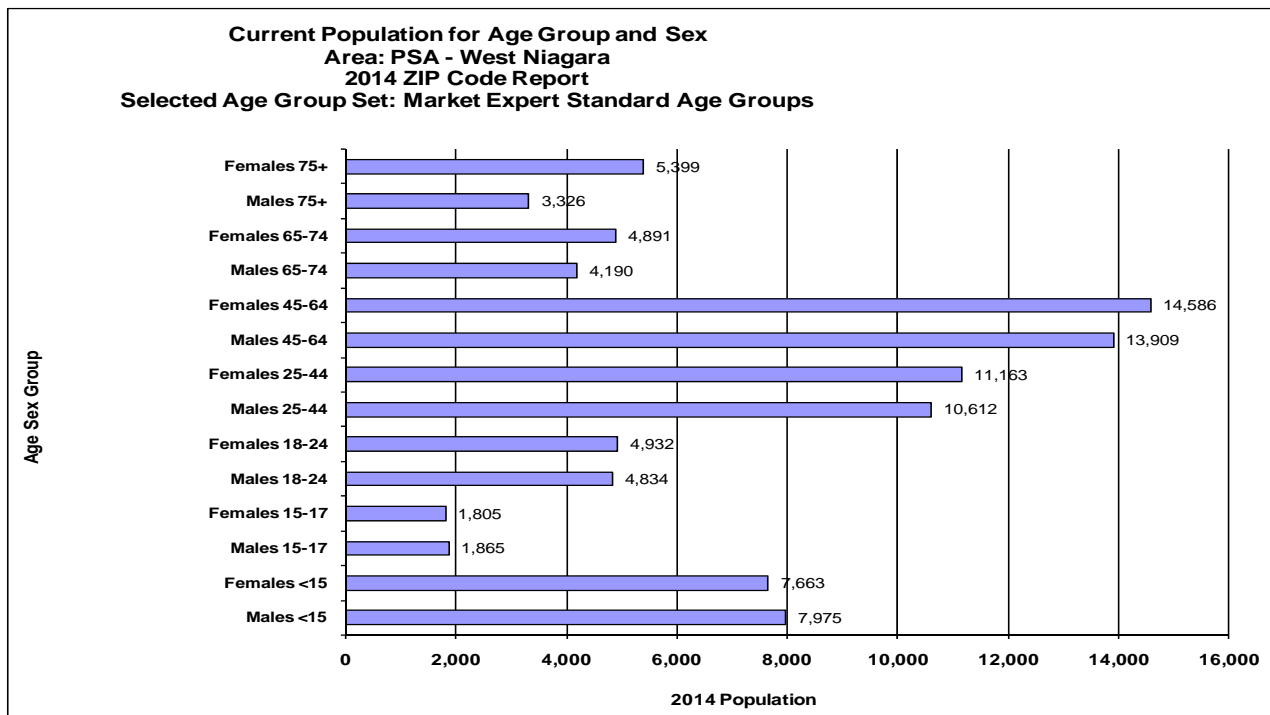
POPULATION DISTRIBUTION

Age Group	Age Distribution				2014 Household Income	Income Distribution		
	2014	% of Total	2019	% of Total		HH Count	% of Total	USA % of Total
0-14	15,638	16.1%	14,821	15.5%	<\$15K	6,724	16.0%	13.3%
15-17	3,670	3.8%	3,404	3.6%	\$15-25K	5,985	14.2%	11.2%
18-24	9,766	10.1%	9,184	9.6%	\$25-50K	11,359	27.0%	24.4%
25-34	11,219	11.5%	11,803	12.3%	\$50-75K	7,651	18.2%	17.9%
35-54	24,700	25.4%	21,904	22.9%	\$75-100K	4,536	10.8%	11.9%
55-64	14,351	14.8%	14,829	15.5%	Over \$100K	5,859	13.9%	21.3%
65+	17,806	18.3%	19,795	20.7%				
Total	97,150	100.0%	95,740	100.0%	Total	42,114	100.0%	100.0%

EDUCATION LEVEL

2014 Adult Education Level	Education Level Distribution		Race/Ethnicity	Race/Ethnicity Distribution		
	Pop Age 25+	% of Total		2014 Pop	% of Total	USA % of Total
Less than High School	1,876	2.8%	White Non-Hispanic	77,277	79.5%	62.1%
Some High School	5,932	8.7%	Black Non-Hispanic	11,555	11.9%	12.3%
High School Degree	25,148	36.9%	Hispanic	2,967	3.1%	17.6%
Some College/Assoc. Degree	21,416	31.5%	Asian & Pacific Is. Non-Hispanic	1,232	1.3%	5.1%
Bachelor's Degree or Greater	13,704	20.1%	All Others	4,119	4.2%	3.0%
Total	68,076	100.0%	Total	97,150	100.0%	100.0%

© 2014 The Nielsen Company, © 2014 Truven Health Analytics Inc.



Poor and Vulnerable Populations – Because unemployment rates remain high, the PSA’s median income remains low. However, median household income varies widely in each community:

Town of Lewiston (Location of Hospital)	\$59,719
Town of Niagara	\$42,029
Town of Porter	\$59,338
City of Niagara Falls (Location of Health Center)	\$31,336
Niagara County	\$45,749
United States	\$51,425

Uninsured Individuals in Niagara County:	
2012: % of Total Population	
<i>Uninsured Individuals:</i>	
Ages 0-19:	7.2%
Ages 0-65:	15.6%
2012: % of Total Households	
<i>Household Income:</i>	
\$0 - 14,999	
Niagara Falls = 22.3%	

As the Affordable Care Act implementation begins, we anticipate the number of uninsured persons to decline significantly between now and 2015 because of Medicaid expansion in our state and increased access to health insurance in the market.

Unemployment/Job Growth – While Mount St. Mary’s is located in a more affluent suburban area, 50% of our patients come from the City of Niagara Falls where employment rates remain low. Compared to New York State, Niagara County traditionally has a higher rate of unemployment than surrounding areas.

Unemployment Rates (Annual Average):			
Unemployment Rate	July 2012	July 2013	July 2014
Niagara County - PSA	8.7%	7.6%	6.4%
Erie County - SSA	8.3%	7.5%	6.3%
New York State	8.9%	7.8%	6.2%
Source: NYS Department of Labor, Labor Statistics			

2014-2017 OVERVIEW

PREVENTION AGENDA PRIORITIES

Chronic Disease (Cardio/Cancer/Diabetes)
Healthy Mothers, Healthy Babies, Healthy Children
Physical Activity and Nutrition (Obesity)

PREVENTION AGENDA GOALS

Our overall goal is to work with and bring together all of those interested in improving the delivery of healthcare in the community. By working on Mom's Net, Childhood Obesity, and Chronic Diseases (Cardiology and Diabetes) in the specific objectives outlined, we continue to expand the collaborative to bring more individuals and organizations to the table to meet our overall goals.

COLLABORATIVE PARTNERS

Mount St. Mary's will continue to support several health collaborative groups which include community partners, the Niagara County Health Department, academia, and local schools. These partners will be engaged throughout the years in an evaluation process to determine new areas of need or refine current service offerings.

TRACKING PRIORITIES

We rely on input from the community via community meetings and stakeholder meetings, information gathered through our admission process, input directly from our physicians (both employed and independent) and reports compiled by local, state and national organizations. We will continue to expand our outreach in the Community to engage additional organizations and experts in an effort to meet our goals.

2014-2017 PLAN OF ACTION

A. Continue major programs such as:

- a. CHEERS Program
- b. Moms Net™
- c. HERO Program
- d. HERO – Pathways to Careers
- e. Partnering With Parents
- f. PACE
 - Reduce Risk of Falls among vulnerable populations
 - Promote Use of Evidence-Based Care to Manage Chronic Diseases as treating mental health improves chronic disease outcomes

B. Continue to build on such initiatives as Community Health Screenings

- a. Free Lipid Panel Screening
 - i. Processed 210 tests in February 2014 (See Notice)
- b. Free PSA Screening
 - i. Processed 225 tests in June 2014 (See Notice)
- c. Free A1c Screening
- d. Free Digital Mammography Screening
- e. Free HgbA₁C Screening

C. Continue Diabetes Education Programs (See attached)

Through October of 2014, the Center for Diabetes Education provided information to

INPATIENTS

- 62 inpatients via referrals

OUTPATIENTS

- 183 outpatients
- A1c levels and changes in behavior are tracked 90 days after last visit

EDUCATION CLASSES

- 59 attendees in education classes
- Survey: On a Scale of 1-5 with 5 being the highest rating, “would you recommend this education to a friend: Results is 4.75 average.

PUBLIC PRESENTATIONS

- Presentations to community groups and organizations and information distributed at local health fairs and displays.

D. Continue Stroke Awareness Programs

As a New York State Department of Health Designated Primary Stroke Center, Mount St. Mary’s Hospital must implement evidence-based best practices that are designed to decrease the risk of morbidity and mortality to stroke patients. MSMH’s Stroke Center has met the rigid requirements of NYS to receive this designation since 2010.

- i. Community wide stroke education programs are provided at least twice a year by a neurologist addressing signs and symptoms of a stroke along with treatments based on best practices. In addition, “May is Stroke Awareness Month,” and a week-long series of educational displays are placed in the main lobby highlighting tips from early identification, risk factors, dietary requirements, rehabilitation options and practical tips for caregivers.
- ii. Stroke Education is also provided at all local community held events sponsored by Mount St. Mary’s Hospital. This also includes “February is Heart Month.”
- iii. We continue to provide stroke appropriate training to all EMS providers stressing the importance of “Time is Brain.”

In addition, in recognition of adhering to these best practices, Mount St. Mary’s was recognized as a 2015 American Heart and Stroke Association “Get With The Guidelines” Stroke GOLD PLUS-TARGET STROKE Honor Roll Elite Achievement award.

Mount St. Mary’s provides only stroke and cerebro-vascular specifically trained physicians and registered nurses dedicated to providing evidence-based practices while serving the needs of potential or actual stroke patients. The anticipated impact of this program is reducing future morbidity and mortality rates.

Mount St. Mary’s provides an on-site registered nurse stroke coordinator for this initiative.

The HERO Program provides Stroke Education to students K-12 and encourages them to share the information with their family.

E. Continue Heart Disease Education Program

Accredited Chest Pain Center: Mount St. Mary's Hospital has achieved the prestigious designation from the 'Society of Cardiovascular Patient Care' as an Accredited Chest Pain Center. Chest Pain Center Accreditation is an operational model for the care of patients presenting with chest pain symptoms. Chest Pain Center Accreditation is rooted in process improvement which enables Mount St Mary's to set standards for the rapid diagnosis and treatment of cardiac symptoms. A team of dedicated multidisciplinary staff address basic cardiac care from the onset of symptoms to include Emergency Medical Services (EMS), the Emergency Department, In/Out patient care, Cardiac Rehab, and Community Outreach.

Accredited hospitals have achieved a higher level of expertise when dealing with patients who arrive with symptoms of a heart attack. Accreditation emphasizes standardized diagnostic and treatment programs, provides more efficient and effective evaluation, assists with rapid treatment of patients with chest pain and other heart attack symptoms, provides education for the community, and strives to reduce the risk factors for heart attack. Mount St Mary's has demonstrated a commitment to community outreach by providing educational programs to the community to promote heart wellness. Mount St Mary's is the only hospital in Niagara County with Chest Pain Accreditation.

Mount St. Mary's provides an onsite RN for Chest Pain Center Accreditation Initiative.

Community wide stroke cardiac education programs are provided, with a focus on Heart Month each February. As part of the hospital's free Lipid Panel Screening, Mount St. Mary's cardiologists and staff conduct educational programming.

In addition, each February a week-long series of educational displays are placed in the main lobby highlighting tips from early identification, risk factors, dietary requirements, rehabilitation options and practical tips for caregivers.

In addition, the HERO Program provides health education programs to elementary, middle and high school students focusing on raising awareness regarding the risk factors, signs, and treatment for heart disease and encourages heart healthy choices for students and their families.

SMOKING CESSATION COMMUNITY PROGRAMS

Education

- Mount St. Mary's Cardiac Center Manager Elyse Updegraph conducts a regular series of free Smoking Cessation programs for the community. *(See Brochure Attached)*
- Through the grant from the Roswell Park Cancer Institute, Mount St. Mary's has visited area Catholic schools to instruct on the dangers of smoking at the grade level (K-6). The materials include videos, brochures and bookmarks to take home as well as workbooks. Larger posters are given to the teacher. A soccer ball with facts about smoking is also left to selected classes to use during the year.
- Mount St. Mary's is incorporating teaching and charting to our smoking cessation goals into our electronic medical record. If the patient needs a 2-week supply of nicotine patches to go home with, they will be provided.
- HERO provides smoking prevention education to elementary and grade school children and encourages children to speak to parents and family members regarding the dangers of smoking.

F. Continue Community Health Education Programs

❖ Denotes Niagara County Department of Health and Joint Hospital Priorities

1. MAJOR PROGRAMS

a. CHEERS Program (Choosing Healthy Eating and Exercise RoutineS for a healthier life)

Childhood obesity is a health problem reaching epidemic proportions throughout the United States. Obesity in the young brings along with it, the stigma of being “different.” Children who are obese are often challenged with poor self-esteem and the emotional trauma of taunting, bullying and other negative behaviors from other children. In addition, these children are at risk for other health problems as they grow, which may affect them in later life. In an effort to address childhood obesity with a comprehensive, clinically sound, age-appropriate and results-oriented focus, the Hospital has developed a program for children, their parents and schools.

The Program (CHEERS: Choosing Healthy Eating and Exercise RoutineS for a healthier life) features a unique combination of portable and flexible elements designed with busy families in mind. The Program teaches children a simple healthy eating plan, which they can easily internalize and use throughout their lives. By engaging parents in the Program, their participation in the selection of foods, exercise and other aspects of the curriculum can be encouraged and supported.

CHEERS Program Goals:

- To solicit parental engagement in encouraging children to improve eating and exercise behaviors through better nutrition and increased activity.
- To promote healthier lifestyles among family members as a result of nutrition and exercise education.
- To provide children and their families with a simple methodology to use throughout life to both understand and promote healthier behaviors.
- To identify self-esteem issues which may relate to childhood obesity, including taunting, bullying or other negative behaviors; to provide children with tools which will assist them in developing a healthier emotional outlook while they are working to improve their nutrition and exercise routines.

Program Impact Measurement:

- **Satisfaction Surveys.** Program effectiveness will be measured through surveys administered to both children and their family members. Elements which will be measured will include:
 - *Classes were helpful to child and family (where the desired impact threshold for the child and family is = to or > 85%)*
 - *Will use the information received to improve nutrition of child immediately and in the future (where the desired impact threshold is = or > 85%)*
 - *Will encourage child to engage in exercise to improve their health and will join them in exercising (where desired impact threshold is = or > 85%).*
 - *Understanding of importance of improving self-esteem for the child (where desired impact threshold is = or > 85%).*

MOM'S NET™ - A NIAGARA COUNTY HEALTH EDUCATION SERVICES COLLABORATIVE

Moms Net™, the trademarked by-product of a major collaborative effort amongst Niagara County hospitals, academic institutions, health care providers and not-for-profit agencies over the past five years was created to address an identified education deficit amongst many at-risk, women in poverty and their families with regard to pregnancy and child care. Included in the Moms Net™ original service offering constellation was a strong emphasis on screening for postpartum depression and the creation of a wrap-around educational and social structure to provide support services to women in the County.

Over the years the program has evolved, other health and service issues have arisen in the execution of the Moms Net™ “mantle” which have propelled the need to focus on expansion of the program to include a broader spectrum of inter-related educational offerings. At this time, programs which address various aspects of maternal/child education and parenting are offered throughout the County, but no single architecture exists to integrate these programs, services and resources into a comprehensive structure. The Moms Net™ concept has been created as a seamless, accessible and effective framework in which to identify the at-risk pregnant population.

Moms Net™ is a structure of health education programs and services for at-risk pregnant and newly delivered women at the poverty level. As such, Moms Net™ for Moms is structured to address the needs of the poor, the underserved and the uninsured. The Program focuses on creating a seamless integration of educational services targeting economic, social, intellectual and access issues which pose barriers to educating women and families in making better health consumer choices. The primary objective of Moms Net™ to reduce fragmentation of services through a comprehensive, collaborative approach to health education. This approach is comprised of a menu of educational offerings and social support systems which can be selected and applied to meet individual patient need.

Moms Net™ Program Goals:

- To enhance the primary care experience by creating full circle of educational resources to which the patient can either be referred or can select to engage in to improve understanding of specific health issues and concerns.
- To provide education and supportive services through local programs, agencies, network resources and instruction to support gaps in service.
- To create and promote a trustworthy network of resources for the patient which support one another, promote the mission and work of each network partner and enhance the patient's care and service experiences.
- To establish an education and supportive services “safety net” to support individual needs and promote better understanding of health literacy issues and concerns.

Program Impact Measurement:

- **Volume/Utilization Indicators.** *Volume and utilization indicators will measure:*
 - *the number of clients served (i.e., clients who have engaged the services) through the Moms Net™ program over the total number of clients referred.*
 - *The percent of referrals generated to Moms Net™ partners by providers over the total number of clients engaged.*

- **Client Satisfaction Indicators (Quality of Life).** *Surveys administered through Collaborative Partners as well as through the Hospital's primary care centers will collect the following elements:*
 - *Number of clients indicating that their quality of life improved through education received through Moms Net™ intervention (where desired impact threshold is = to or > 80%).*
 - *Number of clients indicating satisfaction with education services (where desired impact threshold is = or > 80%)*
 - *Number of clients indicating they have embraced healthier behaviors as a result of education they received from Moms Net™ partners (where desired impact threshold is = or > 80%)*
 - *Number of clients indicating they no longer smoke as the result of education received from Moms Net™ partners (where desired impact threshold is = to or > 80%).* *Number of clients attending Coffee Groups as a result of education from collaborative partners (where desired impact threshold is = to or > 80%)*
 - *Number of clients seeking additional education services as a result of education from Moms Net™ partners (where desired impact threshold is = to or > 80%).*
 - *Number of clients who would recommend Moms Net™ to their family or friends on the basis of their experiences (where desired impact threshold is = to or > 80%).*

- **Quality Indicators**
 - *% of client infants compliant with proscribed immunizations at one year of age (where desired impact threshold is = or > 80%).*
 - *% of client infants receiving all well baby visits as proscribed by 15 months of age (where desired impact threshold is = or > 80%)*
 - *% of clients engaged in breast feeding as a result of Moms Net™ partner education at:*
 - *3 months of age (where desired impact threshold is = to or > 80%)*
 - *9 months of age (where desired impact threshold is = to or > 70%)*
 - *12 months of age (where desired impact threshold is = to or > 65%)*
 - *% of engaged clients who have attended parenting education sessions provided by the Hospital or other Moms Net™ partners (where desired impact threshold is = or > 80%)*
 - *% of clients who have been screened for postpartum depression by Moms Net™ partners as a result of education provided by Moms Net™ providers (where desired impact threshold is = or > 80%)*

HERO (HEALTH EDUCATION RAISES OPPORTUNITIES)

The Health Education Raises Opportunities (HERO) Program, initiated by Mount St. Mary's Hospital and Health Center in February, 2009, focuses on improving health literacy for local school children and their families. HERO is offered in three components: Hero, Pathways to Careers and Partnering With Parents.

HERO is currently offered in different menu formats for students in Grades Pre-K through 12 in five local schools. The Program brings experts in the health and behavioral sciences fields into classrooms to teach children about important and current health topics. Each Menu Topic offered provides age-appropriate information on a specific health issue, teaches children how to identify important signs and symptoms of a disease process, or offers a simple plan for children to internalize to improve their personal health or that of their family. HERO's ultimate goal is to help students and their families to become better consumers of health care.

HERO Elementary Program Goals

- To provide instruction in health and health-related topics to elementary school students, which have the potential to influence their future health and well being.
- To improve the ability of students to think critically by providing them with the tools necessary to read and process health information efficiently.
- To teach students how to extract and differentiate key ideas from media-based electronic and print advertising as it relates to educational information.
- To enable students to assess the veracity of health information they read, see or hear.
- To encourage students to research health topics and determine appropriate solutions within the context of their everyday lives.
- To assist students and their families in becoming better consumers of health care.

Program Impact Measurement

- **Satisfaction Surveys.** The HERO Elementary Program annually reaches over 400 students and their families. To measure the impact HERO has had on these families, various surveys have been developed to collect feedback on each HERO educational module and on the impact the Program has had on students, their families and their schools.
 - **Student Surveys.** Student Surveys are administered through focus groups (approximately 10 students, a composite of all grades engaging in HERO at the school) at the end of each year, over the years since the program's implementation. These surveys measure the following elements:
 - *Student Retention of Information (where desired impact threshold is = to or > 90%)*
 - *Student Rating of the Importance of Information Provided through the HERO Elementary Program (where desired impact threshold is = or > 90%)*
 - *Student Understanding of the Material Provided through the HERO Program Modules (where desired impact threshold is = or > 90%)*
 - *Impact on Family Eating, Exercising and Food-Buying Habits*
 - *Relevance of Content to the Family Unit (where desired impact threshold is = or > 90%)*
 - **Parent/Guardian Surveys.** New to the HERO Program in the 2013 – 2014 school year, parents were asked to comment on the information which their

children are communicating to them at home. The elements of the surveys included the following:

- *Top Three Topics shared and “taught” to parents, siblings and extended family by HERO Program students.*
 - *Impact of information shared by the students on the selection of healthy foods and exercise routines for the family (where desired impact threshold is = or > 85%)*
 - *Impact of information as it may have influenced the family’s health or education needs (where desired impact threshold is = or > 85%)*
 - *Education shared by students with families on stroke signs and symptoms and heart healthy behaviors.(where desired impact threshold is = to or > 85%)*
 - *Requests from parents for suggested program module additions which could make a difference in their family’s health.*
- **Administrative Surveys.** In the 2012 – 2013 school year, a survey was added to gather information on how school administrators perceived student behaviors relative to eating healthier or embracing exercise routines. They were also asked to comment on their observations of students’ understanding of chronic health problems in their respective school settings. Elements of the survey included the following:
- *Programs providing the most impact to students and their families.*
 - *Behavior changes noted in students’ understanding of nutrition habits and exercise which relate to HERO as directly observed or reported by school faculty.*
 - *Discussions with parents on adoption of exercise and healthier eating habits or other healthy lifestyle changes as they result to HERO program modules.*

Topics covered in the HERO menu include:

- **The Magic of Values**
- **Managing Angry Feelings and Building Self-Esteem**
- **Healthy Breakfast Choices**
- **Understanding Diabetes and its Prevention**
- **Fitness for Everyday Life**
- **Signs and Symptoms of Stroke**
- **Smoking is Bad For You**
- **It’s OK to be Sad**
- **Keeping Your Heart Healthy**
- **Friendship**
- **Health Care Careers**
- **Digital Etiquette**
- **Social Media**
- **Healthy Smiles**

HERO - Pathways to Careers Program (Grades 9-12)

HERO's high school program: "Pathways to Careers," began as a collaborative effort amongst Mount St. Mary's Hospital and Health Center, Niagara Catholic High School and Niagara University is offered to juniors and seniors who have an interest in health science careers and occupations. Student Interns working under the direction of Hospital Departmental Leaders as their instructors, obtain college credit through Niagara University for their on-site work in occupational research, hands-on contributions to the Hospital's operations and volunteer efforts. The Program also serves as a long-range recruitment tool, designed to provide ongoing mentoring to the Interns after their completion of the program and post-graduation from high school. Pathways to Careers was also developed to encourage students to select educational programs serving the health occupations in Western New York academic settings, with the ultimate goal of keeping students local for their higher education and subsequent employment upon graduation from college.

Pathways to Careers Program Goals:

- To provide opportunities for high school students to explore careers in healthcare through a structured internship program and directed research.
- To afford students information regarding local academic programs in various disciplines which serve the healthcare industry in the area.
- To channel student interest in healthcare occupations through age-appropriate activities which offer a realistic understanding of the training, licensure and education requirements of the career pathway.

Program Impact Measurement:

- **Course Moderator Evaluation.** *Midway through each of the Pathways to Careers course program semesters, student interns meet with the Niagara University Course Moderator to discuss their course work. These sessions are open to the on-site Instructors as well, who have an opportunity to review student commentary on the course work, clarify instructions and share with peers what activities and focus their internship work has provided to date.*
- **Instructor Evaluation of Students.** *Hospital staff serving as Instructors evaluate students at intervals in the program and evaluate their course work components upon completion of each assignment. Course materials are compiled and then sent to the Course Moderator at Niagara University for review and grades.*
- **Successful Achievement of College Credits.** *While federal law prohibits the exchange of specific student performance information relative to course grades, Niagara University does notify the Hospital of the students' successful completion of the course work and credit awards. (Where desired impact score is = to or > 95%).*

b. Partnering With Parents Program

HERO's third component is "Partnering With Parents." In May, 2011, as part of the HERO (Health Education Raises Opportunities Program) annual evaluation, school administrators convened to discuss expanding the educational elements of the HERO school program into a broader Community health framework. They subsequently identified several topics which they considered most urgent for parents to be aware of and which could be provided in a series of programs. "Partnering With Parents" was established under the sponsorship of Mount St. Mary's as part of an annual Community education outreach series, designed specifically for parents. Topics which have been presented through the Partnering With Parents Program include: Bullying, Cyber-Bullying and the Dangers of Text Messaging; Nutrition and Healthy Meals for Busy Families; Understanding Grief and Loss in Children and Keeping Children Safe From Predators. The 2015 program discusses Self-Esteem and Self-Confidence in Children.

Partnering With Parents Program Goals:

- To provide instruction to parents and the Community-at-large on high profile health issues which have the potential to affect wellness and disease prevention.
- To develop outreach methodologies to expand opportunities for health education to a larger audience.
- To provide programs which focus on the health education needs of families and which provide support for the development of healthier lifestyles.

Program Impact Measurement:

- **Satisfaction Surveys.** *After each program, attendees are asked to complete a survey (five-point Likert scale where 1 was "poor" and 5 was "excellent") and provide commentary on the content and speakers as well as recommend future topics for consideration (where the desired impact threshold of each prompt is = to or > 90%).*

HERO's Collaborative Partners include the following:

- The Niagara County Department of Health
- Niagara University Departments of Nursing and Biology
- Niagara University College of Education
- Daemen College
- Catholic Charities of Western New York
- The Northpointe Council, Inc.
- Dr. Shawn Ferguson, Rainbow Pediatrics (Clinical Moderator)
- The Buffalo Diocesan Catholic Schools
- Fidelis Care New York
- Catholic Academy of Niagara Falls
- De Sales Catholic School, Lockport, NY
- St. Peter's Roman Catholic School, Lewiston, NY
- The Niagara Charter School
- Lewiston-Porter District Schools
- Niagara Catholic Middle & High School
- St. Mary's Hospital and Health Center, Departments of:
 - Education and Staff Development
 - Mission Integration
 - Rehabilitation and Sports Medicine
 - Community Relations

OTHER ISSUES

In addition to the above, Mount St. Mary's is working with DePaul USA, an organization that working with the agencies in Niagara Falls to determine the greatest need in Niagara Falls. Many, many agencies are represented. So far, their determination is that "homelessness" is the most serious issue. They meet regularly.

DISSEMINATION TO PUBLIC

Online/Website

Newsletter

Availability in hard copy in facility

FINANCIAL AID ASSISTANCE

Mount St. Mary's has 2 full-time financial aid counselors and more than 1,200 individuals/families that qualify.

We have our counselors stationed in a visible location in our Emergency Department and our policy is posted publicly and on our website, along with our brochure.

In addition, our Neighborhood Health Center clinic has a full-time social worker who works with individuals on financial assistance, insurance enrollment and socioeconomic challenges. Our staff also has a close working relationship at the local soup kitchen, working with the clients and directing them to facilities where they can receive the healthcare and the financial assistance they need.

SUBMITTED BY:

Community Service Plan Committee

c/o Fred Caso

Vice President – Community Relations

fred.caso@msmh.org

716-298-2146

Father's Day Gift — of — Life & Love

One Free of Charge

Prostate Cancer P.S.A. Blood Test Mount St. Mary's Hospital and Health Center

Outpatient Entrance — North Lobby
Noon to 5:00 PM: June 9 - June 13, 2014
7:00 AM to Noon: Sat., June 14, 2014

— Sponsored by —

Mount St. Mary's Hospital and Health Center & The Board of Associates

Results will be forwarded to your personal physician.
Certificate not required for test. No appointment necessary.

FREE MAMMOGRAM EVENT For UNINSURED Women age 40-64

October is *Breast Cancer Awareness Month*
THIS YEAR ...Celebrate by getting a mammogram !



Breast cancer survivors

A mammogram made the difference for all of us.



Mt. St. Mary's Hospital

Saturday
October 5, 2013
8:00am - 12:00pm

5300 Military Road
Lewiston, NY

To make an appointment for your **FREE** mammogram, call
The Cancer Services Program of Niagara County
278-8285
Appointments are limited.....call early
Can't make the event? Call us to get screened at another time

Niagara County
Cancer Services Program
Your partner in cancer screening, supported education



A program of the
Niagara County
Department of Health

**WESTERN NEW YORK
PUBLIC HEALTH ALLIANCE, INC.**
A Regional Partnership for Public Health



Mount St. Mary's Smoking Cessation Classes

Mt. St. Mary's Smoking Cessation class is a two hour class set to educate the community on how they can quit smoking. Education is provided on smoking cessation tools, nicotine replacement therapy, and living a healthy lifestyle.

Mount St. Mary's Smoking
Cessation Classes

2014 Schedule

Classes in Room 723A
6:00 PM-8:00PM

January 13, 2014
March 10, 2014
May 12, 2014
September 15, 2014
November 10, 2014

Additional Resources:
New York State
Smoker's Quitline
1-866-697-8487
www.nysmokefree.com

To Register Call:

298-2734

***The Class will not be held
if there are no registrants.**

Mount St. Mary's Hospital
5300 Military Road
Lewiston, N.Y. 14092



Immediate Benefits of Smoking Cessation

- Ⓜ **20 Minutes** = Blood pressure and pulse return to normal.
- Ⓜ **8 Hours** = Oxygen levels in blood increase and carbon monoxide in your blood returns to normal.
- Ⓜ **14 Hours** = Mucus in airways breaks up and clears out of lungs.
- Ⓜ **48 Hours** = Senses of smell and taste improve.
- Ⓜ **72 Hours** = Bronchial tubes relax, making breathing easier; energy level increases.
- Ⓜ **4-7 Days** = Nicotine is out of your system (if not using nicotine replacement therapy).
- Ⓜ **11 Weeks** = Circulation improves; immune system enhanced.
- Ⓜ **1-9 Months** = Respiratory symptoms such as sinus congestion, wheezing, shortness of breath, and sputum production decreases. Lung function improves.

What's in a Cigarette?



**WE'RE HERE TO
HELP YOU QUIT
SMOKING!**





Your hospital for life.™

COMMUNITY HEALTH SURVEY

As a leader in the community we are seeking your personal input and opinion about health problems that exist in the Western Niagara County area.

Mount St. Mary's will compile the results and utilize them as we work with others in developing, implementing, and/or continuing any necessary programs or services to address the overall health needs of the community.

Your opinion is important. PLEASE RETURN BY MARCH 30

If you have any questions, please contact Fred Caso at Mount St. Mary's at:

Phone: 298-2146

Email: fred.caso@msmh.org

**Mail: Attn: Fred Caso
Vice President – Community Relations
Mount St. Mary's Hospital and Health Center
5300 Military Road, Room 735
Lewiston, NY 14092**

Community Health Survey Questionnaire

Please take a few minutes to complete this that is designed to gather input and opinions about community health problems in Western Niagara County.

Mount St. Mary's Hospital will be utilizing the results in developing its 2012 Community Service Plan. All responses will be kept in confidence and only released as a compilation of all responses. No individuals or organizations will be specifically identified.

1. In the following list, what do you think are the three most important factors for a Healthy Community? (Factors which most improve the quality of life in Niagara.)

Check only three:

- | | | |
|---------------------------------|-------------------------------------|--|
| 16 Good Place to Raise Children | 6 Excellent Race Relations | 16 Low Crime/Safe Neighborhoods |
| 0 Low Infant Deaths | 0 Low Level of Child Abuse | 28 Good Jobs and Health Economy |
| 19 Strong Family Life | 22 Good Schools | 10 Healthy Behaviors and Lifestyles |
| 3 Parks and Recreation | 1 Low Adult Death and Disease Rates | |
| 11 Clean Environment | 13 Religious or Spiritual Values | |

2. In the following list, what do you think are the three most important health problems in our Niagara community? (Those problems which have the greatest impact on overall community health.)

Check only three:

- | | | |
|--------------------------|------------------------------------|------------------------|
| 25 Aging Problems | 34 Heart Disease and Stroke | 0 Rape/Sexual Assault |
| 31 Cancers | 2 Homicide | 1 Diseases (STDs) |
| 9 Child Abuse/Neglect | 0 Infant Death | 8 Teenage Pregnancy |
| 1 Dental Problems | 24 Diabetes | 10 High Blood Pressure |
| 3 Domestic Violence | 1 Infectious Disease | 2 Mental Health |
| 11 Obesity | | |

3. In the following list, what do you think are the three most important risky behaviors in our community? (Behaviors which have the greatest impact on overall community health.)

Check only three:

29 Alcohol Abuse

4 Racism

29 Being Overweight

19 Tobacco Use

14 Dropping Out of School

3 Not Using Birth Control

33 Drug Abuse

22 Poor Eating Habits

1 Car Safety (Seat Belts/Child Seats)

4. How would you rate our community as a “Healthy Community?”

3 Very Unhealthy 17 Unhealthy **27** Somewhat Healthy 1 Healthy 0 Very Healthy

WHY? _____

- We are an “old” community - High rate of unemployment

- Our rate of poverty is high - Obesity is rampant

- School dropout rate is high - Lack of affordable dental coverage

5. How would you rate the following in your community:

Access to Primary Care 11 Very Good **31** Good 8 Not Good

Access to Specialty Services 6 Very Good **38** Good 6 Not Good

Education on Health Issues 9 Very Good **28** Good 15 Not Good

Please answer the following to help us see how different people feel about local health issues.

Sex: 22 Male 22 Female Zip code where you live: **Western Niagara County**

Age: 0 25 or less 6 26 – 39 14 40 – 54 **21** 55 – 64 7 65 or over

Ethnic group you most identify with:

9 African American/Black 4 Asian / Pacific Islander 2 Hispanic/Latino

3 Native American **34** White / Caucasian Other _____

Household income

5 Less than \$20,000 12 \$20,000 to \$49,999 **34** Over \$50,000

How do you pay for your health care? (check all that apply)

3 Pay cash (no insurance) **24** Health insurance 2 Medicaid

6 Medicare 2 Veterans’ Administration Other _____



COMMUNITY HEALTH SURVEY

As a volunteer at Mount St. Mary's Hospital, we are seeking your personal input and opinion about health problems that exist in the Western Niagara County area.

Mount St. Mary's will compile the results and utilize them as we work with others in developing, implementing, and/or continuing any necessary programs or services to address the overall health needs of the community.

Your opinion is important. **PLEASE RETURN BY MARCH 30**

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Email: fred.caso@msmh.org

**Mail: Attn: Fred Caso
Vice President – Community Relations
Mount St. Mary's Hospital and Health Center
5300 Military Road, Room 735
Lewiston, NY 14092**



MSM Volunteers Community Health Survey Questionnaire

Please take a few minutes to complete this that is designed to gather input and opinions about community health problems in Western Niagara County.

Mount St. Mary's Hospital will be utilizing the results in developing its 2012 Community Service Plan. All responses will be kept in confidence and only released as a compilation of all responses. No individuals or organizations will be specifically identified.

1. In the following list, what do you think are the three most important factors for a Healthy Community? (*Factors which most improve the quality of life in Niagara.*)

Check only three:

- | | | |
|--|-------------------------------------|--|
| 13 Good Place to Raise Children | 1 Excellent Race Relations | 13 Low Crime/Safe Neighborhoods |
| 0 Low Infant Deaths | 0 Low Level of Child Abuse | 30 Good Jobs and Health Economy |
| 12 Strong Family Life | 15 Good Schools | 3 Healthy Behaviors and Lifestyles |
| 0 Parks and Recreation | 0 Low Adult Death and Disease Rates | |
| 4 Clean Environment | 4 Religious or Spiritual Values | |

2. In the following list, what do you think are the three most important health problems in our Niagara community? (*Those problems which have the greatest impact on overall community health.*)

Check only three:

- | | | |
|-------------------------|------------------------------------|-----------------------|
| 5 Aging Problems | 20 Heart Disease and Stroke | 0 Rape/Sexual Assault |
| 22 Cancers | 2 Homicide | 1 Diseases (STDs) |
| 2 Child Abuse/Neglect | 0 Infant Death | 2 Teenage Pregnancy |
| 1 Dental Problems | 31 Diabetes | 5 High Blood Pressure |
| 1 Domestic Violence | 0 Infectious Disease | 0 Mental Health |
| 5 Obesity | | |

3. In the following list, what do you think are the three most important risky behaviors in our community? (*Behaviors which have the greatest impact on overall community health.*)

Check only three:

22 Alcohol Abuse

0 Racism

18 Being Overweight

9 Tobacco Use

7 Dropping Out of School

0 Not Using Birth Control

27 Drug Abuse

12 Poor Eating Habits

0 Car Safety (Seat Belts/Child Seats)

4. How would you rate our community as a “Healthy Community?”

1 Very Unhealthy 10 Unhealthy **17 Somewhat Healthy** 1 Healthy 2 Very Healthy

5. How would you rate the following in your community:

Access to Primary Care 5 Very Good **21** Good 5 Not Good

Access to Specialty Services 3 Very Good **28** Good 1 Not Good

Education on Health Issues 12 Very Good **13** Good 7 Not Good

Please answer the following to help us see how different people feel about local health issues.

Sex: 18 Male 13 Female Zip code where you live: **Western Niagara County**

Age: 0 25 or less 3 26 – 39 3 40 – 54 **13** 55 – 64 12 65 or over

Ethnic group you most identify with:

2 African American/Black 0 Asian / Pacific Islander 0 Hispanic/Latino

1 Native American **28** White / Caucasian Other _____

Household income

1 Less than \$20,000 5 \$20,000 to \$49,999 **25** Over \$50,000

How do you pay for your health care? (check all that apply)

0 Pay cash (no insurance) **16** Health insurance 1 Medicaid

14 Medicare 0 Veterans’ Administration Other _____

SURVEY PARTICIPANTS INCLUDED MEMBERS OF THE BOARD OF ASSOCIATES, ST FRANCIS GUILD, AND GENERAL HOSPITAL VOLUNTEERS