

Kenmore Mercy Hospital

Community Health Improvement Plan 2019-2021



December 2019

Dear Community Resident:

As one of the largest health care providers in Western New York, we continually look for ways to improve the health of those who reside in our community. To support this effort, we conduct a Community Health Needs Assessment every three years to understand the health concerns and issues faced by community residents. Based on the Community Health Needs Assessment conducted in 2018, a Community Health Improvement Plan for 2019 through 2021 was developed to address those needs that are deemed substantive and that Catholic Health is most able to affect.

The assessment process was a collaborative effort between Catholic Health and other local organizations concerned about the health of our community, including Catholic Medical Partners, Erie County Department of Health, Buffalo State College, and the University at Buffalo. Additionally, we solicited input from other community organizations, individuals and groups in the form of surveys and community meetings. This input helped us develop focused programs and services that best address the health and wellness needs of the people who rely on us for care.

Catholic Health is committed to leading the transformation of health care in our community and to improving the health outcomes for all patient populations. To that end, in 2018, Catholic Health provided more than \$126 million in charity care and community benefit for the people of Western New York.

We look forward to working together with you and our community partners to improve the health and quality of life for the residents of Erie County. We welcome you to learn more about Catholic Health by visiting www.chsbuffalo.org, or calling HealthConnection at 716-447-6205.

Mark A. Sullivan President & CEO

Mark Sullivan

Catholic Health

Introduction

Catholic Health's Erie County based acute care facilities jointly conducted a Community Health Needs Assessment to better understand the health needs of the Erie County community. The results of effort informed and guided the development of Community Health Improvement Plans for each of Catholic Health's facilities which include Kenmore Mercy Hospital, Mercy Hospital of Buffalo, Sisters of Charity Hospital, and Sisters of Charity Hospital- St. Joseph Campus. Please note that Catholic Health's acute care facility in Niagara County, Mount St. Mary's Hospital, conducted a separate Community Health Needs Assessment in 2018 for Niagara County resulting in its own three year Community Health Improvement Plan.

The 2018 Erie County Community Health Needs Assessment began by first re-evaluating the needs prioritized in the previous cycle (2016) and the impact of the projects targeting those needs. Catholic Health then solicited new input and perspectives from the public and several community organizations as outlined more specifically in the Process and Methods section of this report.

The 2018 Community Health Needs Assessment report helped to focus our community health improvement efforts on the significant health needs within our Erie County service area including those needs among the most vulnerable and under-represented populations. The resulting three-year (2019-2021) Community Health Improvement Plan represents a collaborative effort in our community to improve patient care, preventive services, overall health, and quality of life.

Significant Community Health Needs Themes

The 2019 community outreach and research revealed the following themes with regard to significant health care needs and disparities in Erie County, many of which will be targeted by Catholic Health as part of its Community Health Improvement Plan.

- 1. Shortage of Primary Care Physicians and Specialists: The shortage of primary care providers remains an issue especially in Buffalo's economically distressed neighborhoods. Of specific note is the lack of providers serving the developmentally disabled and the lack of geriatricians to serve Erie County's large and growing senior population.
- 2. *Cost*: The cost of care is less of an issue for those that qualify for Medicaid than it is for Medicare beneficiaries with moderate incomes and for low to moderate income families covered under commercial insurance with high deductible and copay plan designs.
- 3. *Gaps in Mental Health Reach:* Feedback from community based behavioral health providers suggests that males, persons over 65 and refugee communities are not being adequately reached or served. After obesity, mental health was the second largest concern expressed by Erie County residents according to the Erie County Department of Health community survey.
- 4. *Care Coordination and Navigation:* A lack of Social Workers, Care Coordinators and other support staff lead to poor hand off for follow-up care needs.
- 5. *Cultural Competency:* Interpretation services, lack of trained trauma-informed care staff, and cross cultural sensitivity impact the effectiveness of medical care.
- 6. *Nutrition*: Nutrition was cited by numerous focus group participants as a significant factor adversely impacting medication effectiveness and overall health. Erie County survey findings show that nutrition is one of the biggest concerns amongst the Black community.
- 7. *Transportation:* Those who do not qualify for Medicaid or transportation services are at higher risk for not obtaining medical care when necessary. In fact, the Community Health Needs Assessment survey findings confirm that Buffalo residents, especially those living in the East side, have dealt with this situation at least once within the past twelve months.
- 8. Overuse of the Emergency Department: Community education regarding Emergency

- Department alternatives, as well as embedding social workers and mental health counselors at these sites may reduce their use as a primary source of care.
- 9. *Obesity*: 50% of Erie County residents selected this health topic as being the most interesting to learn about. While tied to the aforementioned topic of "nutrition", the theme of obesity focuses on the detriments that this chronic disease has on overall health, rather than food security.
- 10. Health Literacy: In addition to the feedback received during focus groups regarding the complexity of care plans (inpatient and outpatient) and the general population's struggle to understand healthcare terminology and processes, the Buffalo region also trails in general literacy skill- level. This social determinant is believed to compromise the community's general health.

Overview of Process Leading to 2019-2021 Community Health Improvement Plan

Catholic Health and its hospitals followed the process described below in completing its Community Health Needs Assessment and Community Health Improvement Plan.

1. Establish the Assessment Infrastructure

A Community Health Needs Assessment/Community Health Improvement Plan Steering Committee was established with representation from each of Catholic Health's acute care operations, clinical service lines, Catholic Medical Partners- Catholic Health's independent practice association, Mission Integration, and Planning and Finance. The Steering Committee reviewed Internal Revenue Service and Department of Health requirements and established the project timeline and work plan.

2. Defining the Purpose and Scope

Not-for-profit hospitals in New York State are required to develop a Community Health Improvement Plan with requirements that are similar to those of the Internal Revenue Agency. New York State requires that each organization, in cooperation with the local Department of Health and other providers in their county, collaboratively choose to work on two Prevention Agenda priority focus areas and address disparities in at least one of them.

3. Collect and Analyze Data

Catholic Health, in cooperation with the Erie County Department of Health and other health care provider organizations, commissioned three community focus groups in the first quarter of 2019 including leaders from various health care and social services organizations. Catholic Health also conducted an internal focus group including associates from social work, primary care, acute care, emergency care, home care and long-term care with representation from Kenmore Mercy Hospital, Mercy Hospital of Buffalo and Sisters of Charity Hospital as well as other Catholic Health partners (Catholic Health Medical Partners, IPA and Evergreen Health).

Catholic Health collaborated with the local Department of Health in developing the Erie County Community Health Assessment Consumer Survey and actively participated in disseminating the survey to ensure a representative sample. Catholic Health distributed the survey (English and Spanish translations) via Catholic Health's webpage and social media and by canvassing neighborhood centers in low income and Spanish speaking communities.

Various secondary health data sources (e.g. County opioid statistics) were also utilized to assess need. Refer to Catholic Health's Erie County Community Health Needs Assessment report for a full description of sources.

4. Identify Resources/Community Collaboration

In additional to publicly available program information, the focus group process outlined above served as a means for further understanding what community programs and resources are available and served as a forum for discussing ways to collaborate to better meet the needs identified in the Community Health Needs Assessment.

5. System Prioritization of Community Needs

Kenmore Mercy Hospital's 2019-2021 Community Health Improvement Plan was developed with primary consideration given the 2019-2024 New York State Prevention Agenda and the local Erie County Department of Health 2019 Community Health Improvement Plan priorities that were jointly

developed with participation from Catholic Health and other provider organizations. Additional consideration was given to the need for a continuation of programming identified in the Kenmore Mercy Hospital's 2016 Community Health Improvement Plan.

Final selection of the Kenmore Mercy Hospital's 2019-2021 projects was aided by the application of criteria developed by the Steering Committee. Clinical and administrative representatives from Catholic Health and Catholic Medical Partners participated in the evaluation process utilizing the following six criteria:

- Existing leadership structure can support effort
- Current data collection effort confirms need and its significance in the community
- Meaningful opportunity exists to collaborate with external partners and make a meaningful impact
- Related initiative aligns with and will not compromise the Ministry's Mission and goals
- Other resources required are realistic and within the organizations capacity/budget
- The likelihood that substantial or meaningful impact can be made in our stated service area

6. Development of Community Health Improvement Plan and Monitoring of Progress

Of the seven implementation plans that were developed for Kenmore Mercy Hospital, three are linked to the New York State Prevention Agenda Priority Areas of "Prevent Chronic Disease", "Promote Well-Being and Prevent Mental Health and Substance Abuse Disorders", and "Prevent Chronic Disease".

Two of the seven are designated as community collaboration priorities and include (1) "Improve healthcare literacy targeting the areas of heart disease and diabetes" and (2) "Education program targeting providers regarding alternatives to opioids for pain management".

Each project plan specifies the goals, and objectives for addressing the prioritized significant community health needs. Additionally, each plan specifies the actions to be taken, collaborations that will be instituted, the resources required and the measures of success. The Steering Committee will utilize a dashboard with implementation plan measures to be used to gauge progress throughout the three-year duration. The Steering Committee will meet on a quarterly basis to assess program and make adjustments as required.

7. Board Approval and Public Availability of the Community Health Needs Assessment/Community Health Improvement Plan

The Mission Committee of the hospital's Board was engaged throughout the Community Health Needs Assessment process by reviewing progress, providing feedback and endorsing the resulting work product. The final Community Health Needs Assessment was approved by both the Mission Committee and the Hospital's Board. The Catholic Health Hospital Boards of Directors reviewed and approved the Community Health Improvement Plan plans for each of its hospitals on October 17, 2019. Reports have been published electronically on the Catholic Health website with hard copies available upon request at each hospital.

Summary of Community Health Improvement Plan

Kenmore Mercy Hospital is committed to addressing the significant health needs of its community which is reflected in the hospital's updated three-year (2019-2021) Community Health Improvement Plan. The plan began with the prioritization of the significant health needs identified in the Community Health Needs Assessment. Kenmore Mercy Hospital considered the importance placed on those needs by both New York State as outlined in the Prevention Agenda and by a local assessment conducted by the Erie County Department of Health and an assessment conducted as a region to support the projects chosen as part of the statewide Delivery System Reform and Incentive Program initiative to improve care to the Medicaid and underinsured population. Kenmore Mercy Hospital assessed its capabilities and resources with the potential to partner with others in the community to select projects that had the greatest opportunity to reduce the health disparities and meet the needs of the Erie County community.

Kenmore Mercy Hospital Implementation Plans and Partners

- 1. Improve Healthcare Literacy Specifically Targeting the Areas of Nutrition, Substance Use, Depression and Communicable Diseases- Erie County Community Collaboration Priority
- 2. Broaden Reach of the Sisters Metabolic Center for Wellness to Also Serve the Needs of Those With Diabetes and Heart Disease Stroke Support Programming
- Education Program Targeting Providers Regarding Alternatives to Opioids for Pain Management Helping High Risk Moms to Prevent Prematurity and Address Opioid Dependence- Erie County Community Collaboration Priority
- 4. Healthy Eating and Food Security Collaboration
- 5. Reduce Healthcare Disparities Through Trauma-Informed Care Practices
- 6. Improve Access to Care for Buffalo's Homeless Population
- 7. Depression Screening Program

Kenmore Mercy Hospital Project 1: Improve Healthcare Literacy specifically targeting the typical health care challenges and needs of those with heart disease and diabetes.

Designated Project Leaders: Julie LaManna, Director, Cardiac Services & Director, Patient Care Services Catholic Health Leadership Sponsor/Support: Dr. Hans P. Cassagnol, MD, MMM, Executive Vice President & Chief Clinical Officer/Physician Executive

New York State Prevention Agenda: Multiple- While not a specific Prevention Agenda goal, this initiative addresses a social determinant that cuts across each of the New York State Prevention Agenda Priority Areas and is believed to compromise people's ability to follow self-manage their health.

Identified Need and Project Description:

External and internal focus group conversations highlighted the difficulty faced by health care providers and workers in communicating with various populations with limited language skills. While translation services are available to some extent, the translation does not always resonate as it is not at a level that is approachable by the patient. Numerous secondary sources cite health literacy as a social determinant that results in health disparities. The Center for Disease Control has made healthcare literacy a priority and has formed an Advisory Committee focused on this topic that will inform the final drafting of their "Healthy People 2030" plan.

Project's Target Population:

The Erie County Department of Health's Health Literacy Taskforce will focus on the needs of those with heart disease and or diabetes within the City of Buffalo. Catholic Health's internal workgroup will also focus on the unique needs of Buffalo residents, but will also apply those learnings and methods County wide for those with heart disease and or diabetes. Special attention will be devoted to improving the communication of care plans for patients discharged from Catholic Health hospitals and emergency rooms as well as all Sisters of Charity Hospital primary care clinic patients.

Outcome Objectives:

Reduce health disparities amongst Erie County residents, by improving communication of care plans to patients.

Overall Project Goal/Measures: Year 1 (2019): County Taskforce and Catholic Health's internal advisory group

kick off before year end.

Kenmore Mercy Hospital Project Initiatives and Roll Out by Year and by Site

Year 1 (2019):

(1) Collaborate with Erie County Department of Health to charter a multi-organizational taskforce that will kick off before year end 2019. (2) Form an internal adhoc advisory group that will serve to support the work of Catholic Health representatives on the County taskforce.

Collaboration: Year 1 (2019):

Erie County Department of Health's Health Literacy Taskforce to facilitate interorganizational dialogue regarding best practices. Western New York Library Resources Council to explore the most effective methods for guiding the public in accessing health information.

Year 2 (2020):

Issue whitepaper for each of the 4 targeted topics by year end.

Year 2 (2020):

(1) Taskforce to educate themselves by participating in Center for Disease Control webinars and researching best practices. (2) Brainstorm ideas and test with actual target population. (3) Share suggested to Erie County providers for voluntary adoption.

Year 2 (2020):

Erie County Department of Health's Health Literacy Taskforce to facilitate interorganizational dialogue regarding best practices. Western New York Library Resources Council to explore the most effective methods for guiding the public in accessing health information.

Year 3 (2021):

Distribute sample materials and tip sheets both internally and to community partners.

Year 3 (2021):

- (1) Catholic Health to adopt various tactics as deemed appropriate.
- (2) Survey/focus group providers to assess impact.

Year 3 (2021):

Erie County Department of Health Health's Literacy Taskforce to facilitate interorganizational dialogue regarding best practices. Western New York Library Resources Council to explore the most effective methods for guiding the public in accessing health information.

Catholic Health Resources Required:

Year 1 (2019):

While no operational dollars required, representation from Kenmore Mercy Hospital, Mercy Hospital of Buffalo and Sisters of Charity Hospital nursing and patient advocate staff will population Catholic Health's internal advisory team that will react to and inform the County's Literacy Taskforce.

Year 2 (2020):

Approximately \$16,000 for agency development of materials both digital and collateral.

Another \$4,000 for the purpose of consumer testing concepts/materials.

Year 3 (2021):

Any adoption of suggested tactics may result in the creation of new collateral or digital communications. It is anticipated that the cost of updated collateral materials would be funded within existing budgets for each of Catholic Health's acute care ministries.

Kenmore Mercy Hospital Project 2: Education Program Targeting Providers Regarding Alternatives to Opioids for Pain Management

Designated Project Leaders: Thea Pecht, Manager, Community Outreach; Joseph Lorenzetti, Clinical Rehab Specialist Athleticare

Catholic Health Leadership Sponsor/Support: Dr. Hans P. Cassagnol, MD, MMM, Executive Vice President & Chief Clinical Officer/Physician Executive

New York State Prevention Agenda Link: Promote Mental Health and Prevent Substance Abuse

Identified Need and Project Description:

Physicians in Erie and Niagara Counties may not be aware of alternative approaches to treating musculoskeletal pain and order opioid medications to treat acute pain, which can result in addiction and ultimately substance abuse disorders. This project will focus on educating prescribing physicians and musculoskeletal providers (physical therapists, occupational therapists, chiropractors, etc.) on evidence based care to treat musculoskeletal pain.

Project's Target Population:

Physicians and musculoskeletal providers in the Western New York area.

Outcome Objectives:

Reduce opioid addiction in Erie County by educating prescribing providers of the alternatives to opioids for pain management.

Overall Project Goal / Measures::

Year 1 (2019):

Provide low cost continuing education to musculoskeletal providers and prescribing physicians to reduce the use of opioids as first treatment for acute musculoskeletal Providers education physicians to reduce the use opioids as acute physicians to reduce the use opioids acute physicians to reduce the use opioids as first treatment opioids acute

Kenmore Mercy Hospital Project Initiatives and Roll Out by Year and by Site: pain.
Year 1 (2019):

(1) Offer interdisciplinary continuing education to musculoskeletal providers by nationally known speaker with continuing medical education as well as other required continuing education certifications.
(2) In collaboration with Erie County Department of Health, offer symposium focused on pain classification as basis for using evidence-based practice for treating (not managing) musculoskeletal pain.

Year 2 (2020):

Provide low cost continuing education to musculoskeletal providers and prescribing physicians to reduce the use of opioids as first treatment for acute musculoskeletal pain.

Year 2 (2020):

(1) Offer at least one additional education as part of series in integrating evidence into the treatment of musculoskeletal pain in our community.
(2) In addition to bringing speakers to provider community, offer posteducation learning sessions to ensure integration of evidence into practice.

Year 3 (2021):

Provide low cost continuing education to musculoskeletal providers and prescribing physicians to reduce the use of opioids as first treatment for acute musculoskeletal pain.

Year 3 (2021):

(1) Offer at least one additional education as part of series in integrating evidence into the treatment of musculoskeletal pain in our community.
(2) In addition to bringing speakers to provider community, offer posteducation learning sessions to ensure integration of evidence into practice.

Collaboration:

Year 1 (2019):

Through collaboration with Erie County Department of Health, Catholic Health Musculoskeletal Service Line will bring national and local speakers together to create a learning collaborative, improving our local providers' ability to classify musculoskeletal pain and ensure utilization of evidence to treat musculoskeletal pain.

Year 2 (2020):

Continue work efforts to bring speakers as well as create learning post-education to ensure implementation of best practice into care pathways for musculoskeletal pain in our community.

Year 3 (2021)

Continue work efforts to bring speakers as well as create learning posteducation to ensure implementation of best practice into care pathways for musculoskeletal pain in our community.

Catholic Health Resources Required:

Year 1 (2019):

Community Outreach
Department and Marketing
Musculoskeletal Service Line
representation
Department of Health and
local Medical Society
Kenmore Mercy Hospital,
Mercy Hospital of Buffalo and
Sisters of Charity Hospital will
support promotion of the
education via medical staff
communications.
Add other collaborators as
project progresses.

Year 2 (2020):

Community Outreach
Department and Marketing
Musculoskeletal Service Line
representation
Department of Health and local
Medical Society
Kenmore Mercy Hospital,
Mercy Hospital of Buffalo and
Sisters of Charity Hospital will
support promotion of the
education via medical staff
communications.
Add other collaborators as
project progresses.

Year 3 (2021):

Community Outreach
Department and Marketing
Musculoskeletal Service
Line representation
Department of Health and
local Medical Society
Kenmore Mercy Hospital,
Mercy Hospital of Buffalo
Sisters of Charity Hospital's
will support promotion of
the education via medical
staff communications.
Add other collaborators as
project progresses.

Kenmore Mercy Hospital Project 3: Healthy Eating and Food Security Collaboration

Designated Project Leaders: Michael Osborne, Vice President New Business Development, Planning **Catholic Health Leadership Sponsor/Support:** Joyce Markiewicz, RN, BSN, MBA, CHCE, Executive Vice President & Chief Business Development Officer

New York State Prevention Agenda Link: Prevent Chronic Disease

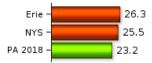
Identified Need and Project Description:

Catholic Health hospitals will pursue collaboration opportunities with community organizations, in addressing food security for Erie County residents. The 2019 Catholic Health Community Benefit Grant program will award community based organizations to support food/nutrition related programs. Grant funding comes from a small percentage of profits from each of the Catholic Health hospitals.

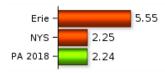
Project's Target
Population:
Outcome Objectives:

Focus will be on vulnerable populations living in the East and West side of the City of Buffalo.

Percentage of adults who are obese:



Percentage of population with low-income and low access to supermarket or large grocery store:



Increase access to healthy and affordable food, as well as increase food security.

Overall Project Goal / Measures:

Year 1 (2019): Finalize goals and related measurements and overall

work plan.

Kenmore Mercy Hospital Project Initiatives and Roll Out by Year and by Site: Year 1 (2019):

Catholic Health hospitals will identify and pursue opportunities to collaborate with community organization(s) addressing the food security and nutrition needs of Erie County residents. (1) The 2019 Catholic Health Community Benefit Grant program will identify and award community based organizations (total up to \$25,000) to support food/nutrition related programs. Grant funding comes

profits from each of the Catholic Health Hospitals. (2) Catholic Health will develop a strategy/work plan by year

from a small percentage of

Year 2 (2020):

Implement identified strategies and measure and monitor progress against plan.

Year 2 (2020):

Participation and support from Kenmore Mercy Hospital, Mercy Hospital of Buffalo and Sisters of Charity Hospital will be expected. Scope of support for each hospital will be finalized by end of 2019. Year 3 (2021):

Assess effectiveness and adjust program where appropriate.

Year 3 (2021):

Evaluate the effectiveness of the program and adjust the populations and geographies targeted if deemed appropriate. This may also require adjustment of the participation and support from Kenmore Mercy Hospital, Mercy Hospital of Buffalo and Sisters of Charity Hospital. end 2019 to more directly and substantively improve access to healthy food options for Erie County's most vulnerable populations. Support from Kenmore Mercy Hospital, Sisters of Charity Hospital and Mercy Hospital of Buffalo will be determined upon completion of the plan. It is the intent to engage associates and promote volunteerism as a part of any program addressing the stated goals.

Year 1 (2019): **Collaborations:**

> First year evaluation will determine the extent of collaboration with external community partners.

Catholic Health Resources Required: Year 1 (2019):

Staff time to develop work

plan.

Year 3 (2021): Year 2 (2020): TBD.

TBD.

Year 2 (2020): Year 3 (2021):

Staff time to implement and operating budget to support initiatives (TBD).

Staff time to implement and operating budget to support initiatives (TBD).

Kenmore Mercy Hospital Project 4: Broaden Reach of the Sisters Metabolic Center for Wellness to Also Serve the Needs of Those With Diabetes and Heart Disease

Designated Project Leaders: Sara Losi, Metabolic & Wellness Navigator

Catholic Health Leadership Sponsor/Support: Dr. Hans P. Cassagnol, MD, MMM, Executive Vice President & Chief Clinical Officer/Physician Executive

New York State Prevention Agenda Link: Prevent Chronic Disease

Identified Need and Project Description:

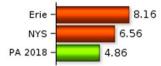
New York State Prevention Agenda Tracking indicators for Erie County reflect that the rate of hospitalizations for patient with heart disease and diabetes is both above the state average and the New York State Prevention Agenda targets. Catholic Health will develop and implement community education classes that will focus on evidence-based practices to modify health behaviors.

Project's Target Population

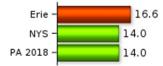
Erie County residents who are referred by primary care physicians based on risk for prediabetes and diabetes, poor health behaviors as well as those residing in communities identified as high risk for chronic disease.

Outcome Objectives:

Rate of hospitalizations for short term complications of diabetes per 10,000 aged 18+



Age adjusted heart attack hospitalization rate per 10,000



Increase skills and knowledge to support healthy food and beverage choices. Increase early detection of cardiovascular disease, diabetes, prediabetes and obesity. Promote the use of evidence-based care to manage chronic disease. Improve self-management skills for individuals with chronic conditions.

Overall Project Goal / Measures:

Year 1 (2019):

Develop and Implement community classes based on evidence-based practice focused on modifiable health behaviors. Year 2 (2020):

Partner with Catholic Medical Partners Primary Care practices and community based organizations to increase community knowledge of educational Year 3 (2021):

Create standardized referral screen for use by Catholic Medical Partners Primary Care Physicians and community based organizations to encourage utilization of services offered at Sisters Metabolic Center for Wellness.

Kenmore Mercy Hospital Project Initiatives and Roll Out by Year and by Site Year 1 (2019):

(1) Addition of registered dietitian staffing to support healthy eating education and counseling.

(2) Engagement of physical therapists, exercise physiologists, and personal trainers to offer exercise and physical activity, and education on benefits of physical activity, to patient

Year 2 (2020):

opportunities.

(1) Sisters Metabolic Center for Wellness will offer education classes developed in 2019 at Sisters Metabolic Center for Wellness at least two times per month.
(2) Sisters Metabolic Center for Wellness in collaboration with Kenmore Mercy Hospital and Mercy Hospital of Buffalo

will offer cardiovascular,

Year 3 (2021):

(1) Direct referrals to dietitians, diabetes educator, licensed clinical social worker for nutrition counseling, diabetes education and management, behavior modification and stress management.

(2) Provide referral opportunity for health care

team for needed services.

and community members. (3) Engage Social Worker employed by Sisters Metabolic Center for Wellness in education of community members and patients in health behavior modification. (4) Identify individual at Kenmore Mercy Hospital and Mercy Hospital of Buffalo to establish and coordinate community education models at hospital and affiliated practices and clinics. (5) Collaborate with director, Inpatient Wound and Diabetic Care Services to develop

diabetes, and prediabetes screenings at least quarterly.
(3) Develop relationships with community based organizations focused on improving health education and awareness.
(4) Share class and screening schedules with Catholic

- (4) Share class and screening schedules with Catholic Health Home Care to share with patients.
- (5) Enhance educational marketing collateral and distribute to Catholic Medical Partners practices and community based organizations.

Sisters Metabolic Center for

(3) Provide Catholic Medical Partners practices and community based organizations closely affiliated with Kenmore Mercy Hospital and Mercy Hospital of Buffalo referral screen to Sisters Metabolic Center for Wellness.

(4) Coordinate multiple same day appointments within Sisters Metabolic Center for Wellness for patients for easy scheduling and encouraging utilization of

Collaboration:

community. Year 1 (2019):

diabetes and prediabetes education and screening opportunities in the

Sisters Metabolic Center for Wellness staff will create evidence based community focused course material aimed at the promotion of prevention and reduction of health behaviors that lead to chronic disease (i.e., smoking, eating habits, physical activity levels, etc.). It will provide program templates and materials to Kenmore Mercy Hospital and Mercy Hospital of Buffalo staff for courses offered to the communities they serve.

Kenmore Mercy Hospital and Mercy Hospital of Buffalo will identify an individual for each site to coordinate educational offerings with the Sisters Metabolic Center for Wellness which will include marketing, course locations, times, topics and audience.

Program registration for all educational classes will be managed by the Catholic Health call center to include contacting attendees for class reminders.

Kenmore Mercy Hospital and Mercy Hospital of Buffalo

Year 2 (2020):

Wellness will work with providers through D'Youville College Hub to provide education and screening opportunities on site for community residents. Sisters Metabolic Center for Wellness director and staff will provide direct access to educational sessions as well as health screenings and smoking cessation program by direct communication with patients identified by community based organizations. Catholic Health Home Care will provide information to patient population on programs offered in Sisters Metabolic Center for Wellness to increase awareness. Community Outreach to assist Sisters Metabolic Center for Wellness and staff with health screenings and registrations for events. Catholic Health marketing and Kenmore Mercy Hospital/Mercy Hospital of Buffalo public relations managers to develop marketing materials geared

Year 3 (2021):

services.

Catholic Medical Partners and Catholic Health physician enterprise resources will be identified to assist in development of standardized patient assessment to indicate need for services offered at Sisters Metabolic Center for Wellness. Catholic Health and Catholic Medical Partners physician offices with high incidences of patients with chronic disease will be identified. Catholic Health grant and/or foundation will work to identify funding resources to assist in promoting and supporting implementation of evidence based practice in modifying health behaviors in high need communities. Health care team will be able to refer patients for nutrition, diabetes education and behavior modification with LCSW by way of direct referral process.

certified diabetes educators will partner with Sisters Metabolic Center for Wellness certified diabetes educator to provide educational classes on diabetes and diabetes management as well as prediabetes programs. Site public relations managers to provide marketing assistance to advertise education sessions hospital wide as well as the community and affiliated clinics and physician practices.

toward educational sessions for Catholic Medical Partners patients, and surrounding community based organizations. Public relations managers will assist to identify community based organizations closely linked to Kenmore Mercy Hospital and Mercy Hospital of Buffalo.

Catholic Health Resources Required:

Year 1 (2019):

Sisters Metabolic Center for Wellness director and support staff. Kenmore Mercy Hospital and Mercy Hospital of Buffalo to have site point person.

Program registration to be handled by Catholic Health call center. Kenmore Mercy Hospital and Mercy Hospital of Buffalo certified diabetes educator.

Sisters of Charity Hospital, Kenmore Mercy Hospital, and Mercy Hospital of Buffalo public relations managers.

Year 2 (2020):

Link to D'Youville College Hub network of providers
Link to community based organizations whose focus has been in areas with high chronic disease prevalence
Catholic Health Home Care
Community Outreach
Sisters Metabolic Center for
Wellness director and staff
Catholic Health marketing/site public relations managers for Kenmore Mercy Hospital and Mercy Hospital of Buffalo.

Year 3 (2021):

Sisters Metabolic Center for Wellness director and staff Catholic Health Home Care Catholic Medical Partners and Catholic Health enterprise Catholic Health grant and/or foundation.

Kenmore Mercy Hospital Project 5: Reduce Healthcare Disparities Through Trauma-Informed Care Practices

Designated Project Leaders: Steven Marks, Vice President Clinical Education & Professional Development Catholic Health Leadership Sponsor/Support: Bartholomew Rodrigues, Senior Vice President & Chief Mission Officer New York State Prevention Agenda Link: Prevent Chronic Diseases

Goal(s) addressing community need:

Our focus group conversations with various nonprofits highlighted the importance of improving access to care and care outcomes for the poor and disadvantaged to improve population health. These populations are more likely to have higher levels of chronic diseases, are less likely to utilize wellness visits, and have poorer health outcomes than the general population. Some organizations in area have instituted trauma-informed care practices to provide better support and engagement with vulnerable communities (such as the poor, immigrants, minority populations, LGBTQ) through community-wide healthcare worker cultural competency training and education.

Project's Target Population

Vulnerable members of Erie County including, but not limited to, individuals who suffer from behavioral health issues, substance abuse disorders, are part of racial or religious minorities, Medicaid recipients, immigrants, LGBTQ, or are HIV positive.

Outcome Objectives:

Promote the use of evidence-based care to manage chronic diseases and improve selfmanagement skills for individuals with chronic conditions.

Overall Project Goal / Measures:

Year 1 (2019):

(1) Creation of advisory group at Mercy Hospital of Buffalo, Kenmore Mercy Hospital. Sisters of Charity Hospital. (2) Identify and inventory educational initiatives related to cultural and structural competencies, in addition to health literacy training at Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital. (3) Determine funding required to support educational initiatives at Mercy Hospital of Buffalo, Kenmore Mercy Hospital, and Sisters of Charity Hospital.

Year 2 (2020):

(1) Continue advisory group meetings at Mercy Hospital of Buffalo. Kenmore Mercy Hospital, and Sisters of Charity Hospital. (2) Prioritize related educational/training initiatives underway as identified in 2019 at Mercy Hospital of Buffalo, Kenmore Mercy Hospital, and Sisters of Charity Hospital. (3) Continue to inventory and reprioritize, as needed, new educational initiatives related to providing traumainformed care. (4) Develop an educational plan, for each hospital site listed above, to educate providers and associates in traumainformed care, based on available financial and associate resources. (5) Begin deploying education at least one of the following sites: Mercy Hospital of Buffalo, Kenmore Mercy Hospital, and Sisters of Charity Hospital in the target areas of the emergency

department and Maternal Child (in-patient) areas.

Year 3 (2021):

(1) Complete any needed modifications to the traumainformed educational plan for Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital. (2) Continue plan implementation for the emergency department and in-patient Maternal Child areas.

Kenmore Mercy Hospital Project Initiatives and Roll Out by Year and by Site

Year 1 (2019):

(1) Develop an advisory group at Mercy Hospital of Buffalo, Kenmore Mercy Hospital, and Sisters of Charity Hospital that includes potential community partners such as University at Buffalo's Institute of Trauma and Trauma-Informed Care, **Community Partners of Western** New York. (2) Focus educational efforts on acute hospital **Emergency and Maternal Child** departments. (3) Identify trauma-informed care champions for Erie County Catholic Health System sites.

Year 2 (2020):

(1) Develop multi-year action plan to begin addressing opportunities identified by organizational assessment completed at Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital. (2) Identify additional Erie County community partners to work with. (3) Begin educational programing to support trauma-informed care at a minimum of one Catholic Health site. (4) Engage Catholic Health System public relations to assist with messaging/marketing of training.

Year 3 (2021):

(1) Continue to implement action plan at Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital and incorporate new opportunities identified during year two. (2) Connect with identified community partners and resources to develop additional educational and formational resources to increase cultural and structural competency. (3) Evaluate the need for traumainformed care training at other Catholic Health locations, such as ambulatory care sites.

Collaboration:

Year 1 (2019):

Participation in advisory group with the following: Catholic Health associates/providers from Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital, University at Buffalo School of Social Work's Institute of Trauma and Trauma-Informed Care, and relevant local nonprofits such as Evergreen or The Pride Center as needed. Work with existing initiatives helping to support cultural competency and care such as the Delivery System Reform **Incentive Payment Program** health literacy educational programming.

Year 2 (2020):

Continue to work with existing partners to identify opportunities for implementing action plan.

Year 3 (2021):

Continue to work with existing partners and identify new partners.

Catholic Health Resources Required:

Year 1 (2019):

(1) Two manager level associates (one from a clinical area and one from non-clinical area) to participate in the advisory meetings and site-specific trauma-informed care educational efforts (estimated to be two to three hours per month). Associates to be provided per site by Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital. (2) University

Year 2 (2020):

(1) Add additional manager and staff level associates, to those identified in 2019 (up to a total of ten clinical and non-clinical) to participate in the advisory meetings and to be trauma-informed care champions (estimated to be two to three hours per month). Associates to be provided per site by Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of

Year 3 (2021):

Continue to work with existing partners and identify new partners.

at Buffalo Institute of Trauma and Trauma-Informed Care to conduct organizational assessments at Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital. This will require funding in the \$20,000-\$30,000 range annually. (3) Other financial and associate resources as determined necessary.

Charity Hospital. (2) University of Buffalo Institute of Trauma and Trauma-Informed Care to continue organizational assessments at Mercy Hospital of Buffalo, Kenmore Mercy Hospital and Sisters of Charity Hospital. Trainings for staff to start at a minimum of one hospital site. (3) This will require funding in the \$20,000-\$30,000 range annually. (4) Additional financial resources as determined in year 2019 of plan.

Kenmore Mercy Hospital Project 6: Improve Access to Care for Buffalo's Homeless Population

Designated Project Leaders: Kathleen Donaldson, Director, Information Technology, Home & Community Based Care; Deb Popp, Director, Health, Home & Nurse Family Partnership

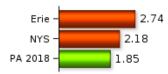
Catholic Health Leadership Sponsor/Support: Joyce Markiewicz, RN, BSN, MBA, CHCE, Executive Vice President & Chief **Business Development Officer**

New York State Prevention Agenda Link: Prevent Chronic Diseases

Goal(s) addressing community need:

Focus groups with a wide range of community health care stakeholders indicated the lack of access to medical providers (primary and specialty care) as well as the inability for patients to understand care plans or navigate the healthcare system. Homelessness only exacerbates these issues, especially when it comes to delivering follow-up care in a home based setting.

Project's Target Population: **Outcome Objectives:** Homeless patients presenting at each of Catholic Health's five Erie County emergency departments. Preventable hospitalizations Ratio of Black non-Hispanics to White non-Hispanics



Reduce avoidable emergency department visits, and improve individuals experiencing homelessness access to medical care.

Overall Project Goal / Measures:

Year 1 (2019):

Establish a baseline measure and three year targets for reducing avoidable emergency department visits at each of our emergency department sites.

Year 2 (2020):

Track progress towards three year targets at each of our five emergency department sites.

Year 3 (2021):

Track progress towards three year targets at each of our five emergency department sites.

Kenmore Mercy Hospital Project Initiatives and Roll Out by Year and by Site:

Year 1 (2019):

Evaluate partnership opportunities with Buffalo City Mission to address the total care needs of the homeless population with high **Emergency Department** utilization.

Year 2 (2020):

(1) Develop standard operating and reporting processes.

(2) Monitor, measure and evaluate program and consider program medications in cooperation with the **Buffalo City Mission if** indicated.

(3) Evaluate and determine ongoing sustainable funding model once Delivery System Reform Incentive Payment Program funding ends.

Year 2 (2020):

Buffalo City Mission-program partner Community Partners of Western New York-funding

Year 3 (2021):

If sustainable model is identified, implement accordingly.

Collaboration: Year 1 (2019):

Buffalo City Mission-program partner Community Partners of Western New York- funding partner.

Year 3 (2021):

Explore additional partner(s) to fund the program.

partner.

Catholic Health Resources Required:

Year 1 (2019):

support.

(1) Program leadership provided by X from Y.
(2) Operational coordinators at each of the Catholic Health emergency departments
(Kenmore Mercy Hospital, Sisters of Charity Hospital and Mercy Hospital of Buffalo).
(3) Other Ministry specific

Year 2 (2020):

(1) Coordinator at each of the Catholic Health emergency departments (Kenmore Mercy Hospital, Sisters of Charity Hospital, and Mercy Hospital of Buffalo)

Year 3 (2021):

To be determined based on first year results.

(2) Other Ministry specific support.

Kenmore Mercy Hospital Project 7: Depression Screening Program

Designated Project Leaders: Marla Duerr, Vice President Patient Care Services

Catholic Health Leadership Sponsor/Support: Dr. Hans P. Cassagnol, MD, MMM, Executive Vice President & Chief Clinical Officer/Physician Executive

New York State Prevention Agenda Link: Promote Well-Being and Prevent Mental and Substance Use Disorders

Goal(s) addressing community need:

Through the focus groups and the 2018 Community Health Needs Assessment survey, depression was identified as a top concern amongst Erie County residents. Catholic Health is aware there is no standardized depression screening across he system, therefore an advisory board has been developed to assess what is presently being done for depression screening and what areas are lacking.

Project's Target Population Erie and Niagara County residents who receive healthcare services through Catholic Health or Catholic Health Partners.

Outcome Objectives:

Age adjusted percentage of adults with poor mental health for fourteen or more days in the last month.



Age adjusted suicide death rate per 100,000 population



Implement a depression screening tool across Catholic Health System to assist those with mental illnesses as well as reduce incidence of suicide.

Overall Project Goal / Measures:

Year 1 (2019):

Creation of advisory group across the continuum to identify present depression screening processes at Kenmore Mercy Hospital, Mercy Hospital of Buffalo, St. Joseph Campus and Mount St. Mary's Hospitals, primary care sites, homecare and long term care sites.

Year 2 (2020):

Make a collaborative decision as to what standardized depression screening tool will be utilized considering opportunities to strengthen suicide prevention. Identify who will be responsible for the screening at each site- five acute care sites, primary care sites, homecare and long term care sites. Begin education and roll out.

Year 3 (2021):

Complete education and roll out utilizing the systems new electronic medical records system. Evaluate the effectiveness of the program. Explore further opportunities with present Catholic Health partners and potential partners to ensure patients have access to appropriate services once depression is identified as a problem.

Kenmore Mercy Hospital Project Initiatives and Roll Out by Year and by site:

Year 1 (2019):

(1) Develop an advisory group that includes representatives from Kenmore Mercy Hospital, Mercy Hospital of Buffalo and Sisters of Charity Hospital as well as our Catholic Medical Partners practices. (2) Discuss what each site is presently doing in regards to depression screening. (3) Identify options for the appropriate tool and process for screening along with barriers that may occur.

Collaboration: Year 1 (2019):

Each site/ministry
representative will be open
and active with decision
making and will collaborate
with the group to achieve the
project goals. Advisory group
will include all Catholic Health
sites/ministries along with
Catholic Medical Partners to
be standardized/consistent.

Catholic Health Resources Required:

Year 1 (2019):

Catholic Health's Clinical Standardization Committee with representation from Kenmore Mercy Hospital, Mercy Hospital of Buffalo and Sisters of Charity Hospital will serve as the advisory group for this project.

All hospitals in-take staff (medical assistants and registered nurses) will participate in the screening process.

Year 2 (2020):

(1) Make a collaborative decision on the standardized depression screening tool to be used taking into consideration the new electronic medical records system application. (2) Identify who will be responsible to perform the depression screening. (3) Develop and provide education to staff. (4) Initiate the roll out. (5) Work with present partners to ensure that the patients have access to services once identified.

Year 2 (2020):

Continue working within the advisory group but also to work with departments such as education to educate and roll out this initiative. Work with our present partners such as Evergreen, and Spectrum to ensure that we are meeting the patients' needs once identified as an issue.

Year 2 (2020):

Dependent on the decision as to what tool will be utilized and what discipline will be utilized to perform. This may be budget neutral.

Continued- time and attendance for those on the advisory group.

Year 3 (2021):

(1) Complete the roll out utilizing our new electronic medical records system.
(2) Evaluate the program and make any necessary changes based on the new electronic medical records system functionality. (3) Continue advisory group meetings to explore further opportunities from present and potential Catholic Health partners to ensure appropriate services are available to link patient once a problem is identified.

Year 3 (2021):

Continue to work with existing partners and identify new partners to ensure that patients are linked to the most appropriate and effective services.

Year 3 (2021):

Continued- time and attendance for those on the advisory group. Otherwise no foreseeable Catholic Health resources may be required.

2016 Implementation Plans

Of the eight project plans initiated as part of the 2016 Community Health Needs Assessment/Community Health Improvement Plan process, the following initiatives have been deemed successful in improving care in our communities and are integrated into our normal operations. Those projects include:

- 1. Reduce Healthcare Disparities in Vulnerable Population through Trauma-Informed Care Practices Charity Care/ Medicaid
- 2. Mental Health First Aid Training
- 3. Stroke Prevention
- 4. Stroke Support Programming
- 5. Donor Breast Milk for Newborns Who Fail to Thrive and are in ICU
- 6. Helping High Risk Moms to Prevent Prematurity and Address Opioid Dependence
- 7. Opiate Prevention in Erie County
- 8. Primary Care Recruitment to Underserved Communities