



**Alice Hyde Medical Center**

# **Community Service Plan 2013 - 2015**



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## Introduction

The 2013 Alice Hyde Medical Center Community Service Plan has been developed in support of the Commissioner of Health's statewide mission to improve the health of all New Yorkers and the overall goals of the Prevention Agenda to Make New York the Healthiest State.

Working with community partners and local health departments, Alice Hyde Medical Center's 2013 Community Service Plan outlines collaborative efforts to improve the prevention of disease, to increase access to quality health care and to remove health disparities within our service area.

## Mission Statement

Building a Healthier Community Together

## Vision

Alice Hyde Medical Center will distinguish itself as a trusted and respected health care leader and provider of choice, exceeding expectations through service excellence.

## Service Area

Celebrating 100 years of serving the community, Alice Hyde Medical Center (AHMC) opened on September 15, 1913. Located in Malone, New York, AHMC offers advanced medicine and exceptional health care that is provided by top-notch professionals and physicians. The Medical Center is accredited by the Joint Commission, and its Medical Imaging Department and Laboratory are accredited by the American College of Radiology and the Joint Commission, respectively. AHMC is comprised of:

- A 76-bed acute care facility
- A 75-bed long-term care facility
- Four community health centers

- A walk-in clinic
- Specialty centers: Cancer Center, Orthopedic and Rehabilitation Center, Cardiac Rehabilitation Unit, Hemodialysis Center, Sleep Lab, and Dental Center.

The Medical Center is an affiliate and health partner of Fletcher Allen Health Care, a premier academic tertiary care center in Burlington, Vermont. The Medical Center provides service to 55,000 residents in northern Franklin County, eastern St. Lawrence County, and western Clinton County.



Alice Hyde Medical Center primarily serves towns, villages, and the Native American Reservation in Franklin County. The Medical Center's primary service area covers the following towns (by zip code). Malone 12953 North Bangor 12966 Chateaugay 12920 Constable 12926 Brushton 12916 Moira 12957 Burke 12917 Fort Covington 12937 Hogansburg 13655 Saint Regis Falls 12980 Bombay 12914

Owls Head 12969 Dickinson Center 12930 The secondary service areas served by AHMC include: Churubusco 12923 Ellenburg Center 12934 North Lawrence 12967 Lyon Mountain 12955 Nicholville 12965 In addition, AHMC provides services to the inmate population from the Franklin County Jail and the Clinton, Franklin, Upstate, Barehill, Chateaugay, Altona, and Adirondack Correctional Facilities.

## Public Participation

Alice Hyde Medical Center, Adirondack Health and Franklin County Public Health are members of the eight-county Adirondack Rural Health Network collaboration. The Adirondack Rural Health Network (ARHN) is a program of the Adirondack Health Institute, Inc. (AHI). AHI is a 501c3 not-for-profit organization that is licensed as an Article 28 Central Service Facility. AHI is a joint venture of Adirondack Health (Adirondack Medical Center), Community Providers, Inc. (Champlain Valley Physicians Hospital Medical Center) and Hudson Headwaters Health Network. The mission of AHI is to promote, sponsor, foster and deliver programs, activities and services which support the provision of comprehensive health care services to the people residing in the Adirondack region.

Since 2002, the ARHN has been recognized as the leading sponsor of formal health planning for Essex, Fulton, Hamilton, Saratoga, Warren and Washington Counties. During 2011- 2012 the ARHN expanded its regional community health planning efforts to include Clinton and Franklin counties, and currently includes critical stakeholders from all eight counties in the regional planning process. The ARHN provides a neutral, trusted mechanism through which key stakeholders throughout the region can plan, facilitate and coordinate the activities necessary to complete their required community health planning documents, and strategize on a regional level to address common health care concerns.

The process of identifying the important healthcare needs of the residents of Franklin County and the AHMC service area involved both data analysis and consultation with key members of the community. The data was collected from multiple sources including publically available health indicator data, data collected from a survey conducted by the Adirondack Rural Health Network and a survey / focus group conducted by Franklin County Public Health, Adirondack Health and Alice Hyde Medical Center.

The health indicator data is collected and published by New York State and contains over 300 different health indicators. Since 2003, ARHN has been compiling this data for the region and producing reports to inform healthcare planning on a regional basis. Last year, ARHN undertook a project to systematize this data into a relational database to provide improved access and analysis. The results of this analysis provide a statistical assessment of the health status for the region and each county therein.

In December 2012 and January 2013, ARHN conducted a survey of selected stakeholders representing health care and service-providing agencies within an eight-county region. The results of the survey are intended to provide an overview of regional needs and priorities, to inform future planning and the development of a regional health care agenda. The survey results were presented at both the county and regional levels.

In April 2013 all the stakeholders that completed the survey were invited to a community forum held on May 1<sup>st</sup> at Paul Smiths College in Franklin County. Using the results of the indicator analysis and the survey and other community assessments, 31 stakeholders met at Paul Smiths College to discuss the Health of Our Community. The group was introduced to the Prevention Agenda, the data that was collected and the prioritization process. The participants were broken in to small groups to discuss priorities in each of the priority areas. Each group then reported out to the whole group which opened it up for discussion. The group who attended the forum consisted of representatives from Adirondack Health, Alice Hyde Medical Center, Social Services, Mental

Health, school districts, Public Health and several Community Based Organizations.

The next step was for Alice Hyde Medical Center and key stakeholders to prioritize each of the focus areas using the prioritization matrix provided by the Center for Health Work Force Studies. Fifteen people from the 31 stakeholders that attended the May meeting were chosen to conduct the prioritization process in either small group session or one on one. The following criteria were considered in the prioritization process, to determine need, feasibility, and impact:

- How severe is the problem?
- What is the perceived community need?
- Is there a perceived need for additional resources?
- Is funding available and sustainable?
- What is the availability of evidence-based interventions?
- What is the capacity of stakeholders to implement potential interventions?
- What is the effectiveness of current strategies?
- Are there multiple health benefits?

## Assessment of Public Health Priorities

The results of the process described above were tabulated and the scores were presented to the community stakeholders. The two priority areas that scored the highest were:

- Obesity in Children and Adults
- Increase Access to High-Quality Chronic Disease Prevention Care and Management in both Clinical and Community Settings.

The following summarizes the major findings from the ARHN survey as applicable to the Franklin County and AHMC service areas. In most cases, the survey results for each of the eight individual counties do not differ in either a statistical or interpretive sense from the survey results for the overall region.

- The top emerging issues in the region include increases in obesity and related health issues, increases in substance abuse, and mental illness.
- The population groups identified most in need of targeted interventions are: the poor, children, individuals with mental health issues, the elderly, and substance abusers.

- Only about half of survey respondents reported being familiar with the NYS Department of Health Prevention Agenda priority areas.
- Among the five NYS Prevention Agenda priority areas, the largest portion of Franklin County respondents selected chronic disease prevention as being most important. However, the promotion of mental health and prevention of substance abuse topic area had a greater portion of respondents rank it second most important. The two topic areas are essentially tied for most important in Franklin County, which represents a slightly different prioritization than seen elsewhere in the region.
- The agenda area of HIV, STIs, and vaccine preventable diseases was ranked lowest in terms of overall interest and concern.
- The individual issues of greatest importance to survey respondents were the general health and safety of the physical environment, diabetes prevention, substance abuse, mental health screening and treatment, and the prevention of heart disease.
- Current involvement in efforts related to NYS Health Agenda issues is highest for prevention of chronic disease, promotion of a healthy and safe environment, and addressing the health of women, infants, and children.
- Franklin County respondents indicated the lowest level of current involvement with efforts to prevent HIV, STIs, and vaccine-preventable disease.
- Most respondents rate current efforts to address major health issues as only moderately effective. Additionally, a large portion of respondents indicated that they did not know enough to rate the effectiveness of current efforts, which suggests that additional information and publicity may be needed for health activities in the region.
- In Franklin County, respondents gave a slightly lower rating to the overall health and safety of the service area than the region as a whole, with most describing it as only “fair.” In general, the rating of the overall health and safety of the region was given only moderate ratings both in Franklin County and throughout the region.
- Education is a dominant strategy currently used to address major health issues in the region.
- Technology is not highly utilized by health service providers and their clients in the region. A slight majority of respondents agreed that technology enhancement should be a top priority for the region.

- The top future concern for stakeholders was funding. Regional health care organizations expressed concerns about reimbursement rates and expectations of reduced funding through government payments and other grants.

## Three year Plan of Action

AHMC's Action Plan will be developed under the auspices of the Community Wellness Program. Established in 2003, the Community Wellness Program serves as the focal point for community wellness and outreach activities.

Together with community partners, we will focus on program development and implementation of new activities, identifying baselines for future evaluation, and comparison to current benchmarks. Subsequently (2014-2015) we will establish quantifiable measures to work toward.

AHMC will be addressing two focus areas in regard to *Preventing Chronic Disease*. The two focus areas that scored the highest, based on need, feasibility, and impact are:

**Focus Area 1:** *Reduce obesity in children and adults.*

**Objective** **Reduce the percentage of children who are obese by expanding the role of health care and health service providers in obesity prevention by December 31, 2017**

### Projects

1. The *How's Your Health* (HYH) Health Risk Assessment (pediatric version) is going to be incorporated into two pediatric practices. HYH is a health assessment tool that unmask behaviorally sophisticated issues that help or impede a person's overall health and wellbeing.
2. A community-wide *Let's Go! 5210* campaign introduced through media and pediatric services: (per Maine's *Let's Go! 5210*).
  - 5 or more servings of fruits and vegetables
  - 2 or less hours of screen time
  - 1 hour or more of physical activity
  - 0 sugar-sweetened drinks

Measurements and objectives will be determined from patient data collection after the first six months of implementation with objectives achieved by December 31, 2015.

**Focus Area 2:** *Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings.*

**Objective** **Increase the percentage of adults 18 years and older who had a test for high blood sugar of diabetes within the past three years and provide diabetes screening to 300 at-risk individuals by December 31, 2014**

**Projects**

1. Implement a screening outreach plan to target individuals at-risk for diabetes.
  - Engaging individuals in a variety of settings, including the community college, worksites, adult centers, and social services agencies
  - Creating a new duplicate form to measure and track screening results
  - Establishing a system to contact at-risk individuals to ensure follow-up with a healthcare provider
  - Connecting people to community resources as needed (ie: primary care providers, facilitated enrollers/insurance marketplace navigators)
2. Conduct two Diabetes Prevention Programs per year in the greater Malone community

Alice Hyde Medical Center is registered as a Diabetes Prevention Recognition Program, with the Centers for Disease Control and Prevention (effective June 2013). The Diabetes Prevention Program is an evidence-based year-long program for people with pre-diabetes, a history of gestational diabetes, and/or at-risk for developing diabetes.

Educational sessions:

16 weekly one-hour sessions followed by  
6 to 8 monthly sessions addressing healthy lifestyle changes

**Focus Area 3: Address Health Disparities - Improve Health Status and Remove Health Disparities**

Partners: Alice Hyde Medical Center  
Adirondack Health Institute  
Adirondack Medical Home  
Literacy Volunteers  
Treo Solutions/North Country Healthcare Providers  
Wead Library

The following activities and initiatives are either in place or are being developed to address the health disparities in our service area, by:

- increasing access to care
- improving communication
- removing barriers
- working with new partners

A family nurse practitioner and a physician assistant have been hired to expand the staff of the Alice Hyde Primary Care Practice. Two internal medicine physicians have also been recruited to further expand the capacity of the Alice Hyde Primary Care Practice. This has significantly expanded our ability and capacity to care for more patients in need of primary care. This is a growing need in the community and the ability to meet this growing demand is critical to the health of our community.

Alice Hyde Medical Center will be launching the “How’s Your Health” (HYH) initiative in the pediatricians’ practices. This program is an on-line, health-assessment tool that provides our health care providers with health, wellness, and lifestyle insight and information about their patients, thus improving communication between the patients and the health care providers; there is research and evidence that shows that engaged patients have healthier outcomes. HYH offers helpful tools for patients to improve self-care and problem solving. Furthermore, it identifies unmet needs so that healthcare providers can arrange for access to additional community resources, as needed.

Community outreach events are being planned to provide assistance in enrolling for health insurance via the *New York State of Health*, the official Health Plan Marketplace. We are partnering with enrollment specialists to identify how – and where – to best reach members of our communities.

A Discharge Communication Program has been developed to provide follow-up care for our in-patients. Patients with Congestive Heart Failure, Chronic Obstructive Pulmonary Disease, and community acquired pneumonia will be called to meet any additional needs with the goal of preventing readmission within 30-days.

An educational campaign is being developed via the North Country Healthcare Providers collaboration, to assist individuals in the decision-making process of whether they should go to an Urgent Care Clinic versus the Emergency Room.

We will be partnering with the Wead Library and Literacy Volunteers to establish new community outreach/health communications projects.

### **Ecological Models for Community Health Improvement**

In developing and implementing the New York State Prevention Agenda strategies, Alice Hyde Medical Center will be considering the components of three models to ensure the greatest scope for success and sustainability:

- the Health Impact Pyramid
- the Spectrum of Prevention
- the sectors recommended in the New York State Prevention Agenda

## Dissemination Plan

The Community Service Plan, the Community Health Needs Assessment, and the Implementation Strategy documents will be posted on the AHMC website at [www.alicehyde.com](http://www.alicehyde.com). The public will be able to access these documents via the website or by request.

Copies may be requested from the Department of Community Relations at 518-481-2794.

## Maintaining Partner Engagement

AHMC has created “Implementation Teams” that will be responsible for each Focus Area’s Action Plan. We have collaborated with all of the agencies listed as partners in the community service plan and are committed to dedicating resources to the selected activities. Our relationships are established, our partnerships strong, and we will hold regularly scheduled meetings to collect, share and review data. Data will be used to track progress and make mid-course corrections.