

St. Joseph Hospital

Community Service Plan

2014–2016



Approved by the hospital board on September 12, 2013

Updated June 9, 2014



St. Joseph Hospital
Catholic Health Services
At the heart of health

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I. Executive Summary

1. Hospital Mission Statement

Catholic Health Services of Long Island (CHS), as a ministry of the Catholic Church, continues Christ's healing mission, promotes excellence in care and commits itself to those in need.

CHS affirms the sanctity of life, advocates for the poor and underserved, and serves the common good. It conducts its health care practice, business, education and innovation with justice, integrity and respect for the dignity of each person.

2. Definition and Brief Description of Community Served

The hospital primarily serves patients from the following communities: Massapequa, Farmingdale, Amityville, Levittown, Massapequa Park, Wantagh, Seaford, Bethpage, Bellmore, East Meadow, Lindenhurst, Copiague, Babylon, Hicksville, Plainview and Woodbury. Located in the southeast corner of Nassau County, St. Joseph's primary service area reside in the aforementioned communities. The hospital has a primary service area population of approximately 300,000 with a secondary service area of approximately 100,000 for a combined service area of 400,000.

2012 St. Joseph Hospital discharge data by ethnicity

Asian	37	0.6%
Black	532	8.0%
White	6044	90.4%
American Indian	1	0.0%
Other	73	1.1%
Total	6687	100.0%

2012 St. Joseph Hospital discharge data by age

14-17	4
18-24	94
25-34	213
35-44	269
45-54	616
55-64	869
65-74	1091
75-84	1610
85+	1921
Grand Total	6687

St. Joseph reported \$872 thousand in charity care at cost net of offsetting revenues in 2012. Community service, uncompensated care and other charitable activities provided for the community totaled \$5.3 million at cost, and \$35 thousand was reported in bad debt at cost net of offsetting revenues in 2012.

3. Public Participation

(a) *Community Partners and Their Roles.* St. Joseph Hospital’s Community Service Plan draws upon the results of the Nassau County Community Health Needs Assessment (CHNA), which was conducted by a Nassau County Health Department-hospital collaborative of which St. Joseph Hospital was a part, and upon St. Joseph Hospital’s own community programs and a variety of data sources specific to the St. Joseph Hospital service area.

NASSAU COUNTY DEMOGRAPHICS 2012	Nassau County	New York State
Population, 2012 estimate	1,349,233	19,570,261
Population, 2010 (April 1) estimates base	1,339,529	19,378,104
Population, percent change, April 1, 2010 to July 1, 2012	0.7%	1.0%
Population, 2010	1,339,532	19,378,102
Persons under 5 years, percent, 2012	5.4%	6.0%
Persons under 18 years, percent, 2012	22.5%	21.8%
Persons 65 years and over, percent, 2012	15.8%	14.1%
Female persons, percent, 2012	51.5%	51.5%

White alone, percent, 2012 (a)	77.3%	71.2%
Black or African American alone, percent, 2012 (a)	12.2%	17.5%
American Indian and Alaska Native alone, percent, 2012 (a)	0.5%	1.0%
Asian alone, percent, 2012 (a)	8.4%	8.0%
Native Hawaiian and Other Pacific Islander alone, percent, 2012 (a)	0.1%	0.1%
Two or More Races, percent, 2012	1.6%	2.2%
Hispanic or Latino, percent, 2012 (b)	15.3%	18.2%
White alone, not Hispanic or Latino, percent, 2012	64.1%	57.6%

Living in same house 1 year & over, percent, 2007-2011	93.1%	88.5%
Foreign born persons, percent, 2007-2011	20.9%	21.8%
Language other than English spoken at home, percent age 5+, 2007-2011	27.5%	29.5%
High school graduate or higher, percent of persons age 25+, 2007-2011	89.9%	84.6%
Bachelor's degree or higher, percent of persons age 25+, 2007-2011	41.2%	32.5%
Veterans, 2007-2011	67,872	986,313
Mean travel time to work (minutes), workers age 16+, 2007-2011	33.5	31.4

Housing units, 2011	468,593	8,119,364

Homeownership rate, 2007-2011	81.8%	54.8%
Housing units in multi-unit structures, percent, 2007-2011	21.1%	50.5%
Median value of owner-occupied housing units, 2007-2011	\$478,600	\$301,000
Households, 2007-2011	443,315	7,215,687
Persons per household, 2007-2011	2.96	2.59
Per capita money income in the past 12 months (2011 dollars), 2007-2011	\$42,307	\$31,796
Median household income, 2007-2011	\$95,823	\$56,951

(a) Includes persons reporting only one race.

(b) Hispanics may be of any race, so also are included in applicable race categories.

(Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Non-employer Statistics, Economic Census, Survey of Business Owners, Building Permits. Last Revised: Thursday, 27-Jun-2013)

Public participation in the Nassau County CHNA includes:

- A qualitative assessment based on 17 key-informant interviews with local health organization leaders to identify pressing health needs in the community. The majority of interviews were conducted during March and April 2013. Some participating organizations were: American Cancer Society, American Diabetes Association, American Heart Association, Catholic Charities, Circulo de la Hispanidad, FECS, Health and Welfare Council of Long Island, Island Harvest, Jewish Association Serving the Aging (JASA), Long Island Council of Churches, Mental Health Association of Nassau County, Perinatal Services Network, Project Independence, Sustainable Long Island, and United Way.
- A quantitative assessment based on a community survey that was widely distributed in both Spanish and English through hospital outreach, public libraries, Survey Monkey, NCDOH programs and county agencies, faith-based organizations, community centers, and social media. The survey elicited more than 1,000 responses.

St Joseph Hospital's own community health needs assessment survey, which elicited nearly 108 responses, a response rate of 72.97%, was publicly distributed through a variety of sources, including but not limited to attendees of educational lectures, St. Joseph Hospital employees and volunteers, hospital visitors, and others. In the 19-question health assessment survey, respondents were asked about their own health and health concerns/needs and (in the case of one question) those of "you and your neighbors". Of those surveyed, results revealed that 67.62% of the respondents were female and 32.38% male, 3 participants did not respond to this question. Approximately 86.4% of adults in the St. Joseph Hospital survey service area rated their health status as very good to fair. The majority of respondents (95%) carry health insurance and 78.70% reported they were Caucasian. The report indicated 24.07% were high school graduates, 27.7% have some college and 31.48% were college graduates.

(b) Outcomes of the Public Input Process in Brief.

The Nassau County CHNA stakeholder interviews were held in the spring of 2013. The results of the assessment showed the following: (1) Diabetes, heart disease and cancer are the most commonly reported chronic diseases of concern. (2) The health burden of overweight and obesity-related diseases and conditions, such as diabetes and heart disease, is increasing significantly, with more outreach to low socioeconomic status (SES) and minority populations needed to provide education about nutrition and healthy food practices. (3) Finally, there has been an increase in the prevalence of mental health issues. St. Joseph Hospital's local survey supports a focus on diabetes and obesity. In addition, survey results strongly support the importance of increased awareness for programs addressing mental health issues.

(c) Public notification of these sessions.

In the spring of 2013, the various community partners (including hospitals, local health department, and community-based organizations) reached out to the public via community health fairs, lectures, screenings, newsletters, and in other ways, to solicit their input.

Continued Engagement with Partners and Tracking Progress

Long Island Health Collaborative

As a result of the CHNA process and with both Nassau and Suffolk counties identifying the same two public health priorities, a collaborative bi-county work group was formed with participants including: hospitals, county health departments, health and welfare organizations, and colleges.

- Long Island's 24 hospitals
- Nassau-Suffolk Hospital Council
- New York State Department of Health
- Nassau County Department of Health
- Suffolk County Department of Health Services
- United Way of Long Island
- American Lung Association of Northeast
- Adelphi University
- Western Suffolk BOCES
- Cornell University Cooperative Extension
- YMCA
- Catholic Charities
- Healthcare Association of New York State
- Kaiser Family Foundation
- Robert Wood Johnson Foundation
- County Health Rankings & Roadmaps
- LIHC program inventory
- HITE site
- Centers for Disease Control and Prevention (CDC)
- Institute of Medicine
- U.S. Department of Health and Human Services
- National Institutes of Health
- Healthypeople.gov

Unique in New York State, this collaboration will allow for health systems and community partners to be involved in the education, planning and provision of services that goes well beyond clinical care and enters the realm of public health and prevention.

Long Island Health Collaborative (LIHC) is a partnership created to support the work group's collective efforts in addressing the selected Prevention Agenda priority and focus areas. This innovative regional effort will culminate in the form of a comprehensive, island wide public awareness campaign. A website, which will be maintained by the Nassau Suffolk Hospital Council, is currently being designed for LIHC.

The LIHC website will explain the purpose for LIHC as well as information on population health, the role of reform in the changing landscape of health care and the role of patients and consumers in maintaining their own health. A brief narrative of the focus areas will be found with links to more detailed information and resources as well as an explanation of state and federal mandates which are driving more robust and collaborative community health planning. The site will also include links to helpful resources such as BMI calculators and specific disease risk assessment tools.

Additionally, the bi-county work group is creating a universal metric assessment in order to be able to collect reliable and reportable data for the region. The metric will feature four subscales which will dovetail the focus areas. Data will be collected and analyzed by one of LIHC's university partners. Currently, it is anticipated that the metric would be given to program participants in chronic disease management or wellness programs with three or more education sessions. Participants would complete a survey a total of three times: pre-program, immediately post-program and again 3–6 months post-program.

4. Priorities Chosen in Brief

During various meetings in 2012 and 2013, members of the Nassau County Department of Health, in addition to community service plan coordinators from participating hospitals (including St. Joseph), reviewed the New York State Prevention Agenda Objectives and discussed the areas of greatest need in Nassau County.

The results of the 2012 and 2013 CHNA surveys identified the following areas of health concerns in our community as specified in the charts on page 10.

What are the biggest ongoing health concerns in your community; and what are the biggest ongoing health concerns for you?

- Cancer
- Obesity/weight loss
- Diabetes
- Drug/alcohol abuse
- Heart disease
- Women's health

Which of the following is most needed to improve the health of your community?

- Healthy food choices
- Weight loss

- Mental health services
- Drug/alcohol rehab

Consequently, the health priorities chosen were:

- Diabetes prevention, control and treatment
- Obesity prevention, control and treatment
- Mental health issues

This decision is based on the needs of the St. Joseph Hospital's service area identified on page 2 of this report and the needs St. Joseph Hospital can most effectively meet given its current service offerings and resources. The first is to increase access to high-quality chronic disease preventive care and management in both clinical and community settings. St. Joseph Hospital will focus on diabetes preventive care. The other priority is to reduce obesity in members of the community, both children and adults. The third area falls within the mental health arena addressing the need for public programs on mental health.

The first two (diabetes and obesity) were chosen, in part, because St. Joseph Hospital resolved to work with other members of LIHC in a collective effort to improve community health. Both obesity and adult onset diabetes can be caused by poor nutrition, bad dietary choices and lack of activity. Living in a suburban community necessitates motor vehicle transportation rather than walking. A "convenience culture" gives little opportunity for built-in activities, and many areas do not have safe walking routes within their communities. Providing fresh fruits, vegetables and lean meats prove problematic to socioeconomic status (SES) families. Those who depend upon food pantries have limited choices; and the selections are often simple carbohydrate-based, processed foods and contain high fructose corn syrup, which has been determined to cause weight gain and add sugar to the diet. Mental health was also chosen, as this was identified in the CHNA as one of the "most needed to improve the health of your community". A need for mental health services was identified by 20.8% of Nassau County respondents and 20.0% of Select Community respondents.

Further reasons for choosing the priorities follow:

Priority 1: Diabetes prevention, control and treatment. The reasons for regarding this as perhaps the most critical need in our service area are given below. At St. Joseph Hospital, the Diabetes Education Center is considered by the American Diabetes Association (ADA) and the American Association of Diabetes Educators (AADE) a Nationally Recognized Center. St. Joseph offers a well-established Hyperbaric/Wound Care Center, as well as podiatry services, both of which support the growing outpatient diabetes education initiative already in place. Further, CHS has made a strong commitment to develop diabetes education and preventative services across all hospitals, for both inpatients and outpatients. Free services such as CHS's Healthy Sundays health screenings, lectures and a monthly diabetes support group will be offered to help address the health disparities in underserved populations and to those in a challenging socioeconomic status (SES). As illustrated in the data on page 2 of this report, 69% of the discharged patients in 2012 fell into the 65-85-plus-year-old age range. Individuals within this group are often on fixed incomes and may need guidance in making better food choices.

Priority 2: Obesity prevention, control and treatment. In addition to its documented impact in its service area, St. Joseph Hospital seeks to further extend its services related to nutritional education and obesity prevention. St. Joseph Hospital will develop and implement a healthy lifestyle course hosted at

the hospital; explore the possibility of partnering with community organizations for access to healthier, affordable food; and through the CHS Healthy Sundays program and free lectures, reach underserved communities and offer more screenings and education related to obesity to address the health disparity in the community.

Priority 3: Mental health issues. St. Joseph Hospital will provide and promote lectures on identifying and addressing mental health issues. At this time, St. Joseph Hospital does not offer any significant mental health services; however, St. Joseph has a very effective bereavement group, which meets twice a week each season, addressing depression from loss. Efforts will be made to increase and improve the aspects of mental health information and education provided to the community at every lecture/seminar and community outreach event.

II. Assessment and Plan

A. Assessment and Selection of Public Health Priorities

St. Joseph Hospital's Community Service Plan draws upon (1) the results of the Nassau County Community Health Needs Assessment (CHNA), which was conducted through a Nassau County Health Department-hospital collaboration of which St. Joseph Hospital was a part, and (2) St. Joseph Hospital's own community survey. Sections 1 and 2 below describe the collaborating organizations, the data-gathering processes, and results of (1) and (2). Section 3 describes the priorities chosen by St. Joseph Hospital and a more detailed rationale for choosing them.

Nassau County Health Needs Assessment: Process, Methods, and Results

The island-wide Nassau-Suffolk Hospital Council is collaborating with Nassau and Suffolk Departments of Health, three Catholic Health Services hospitals (Mercy, St. Francis, and St. Joseph), the North Shore-LIJ Health System, South Nassau Communities Hospital, and Winthrop Hospital. The Long Island Health Collaborative (LIHC) met several times in spring 2013 to plan and implement the Nassau CHNA.

Nassau County CHNA has a qualitative and quantitative component. The qualitative assessment, based on key-informant interviews with leaders of the health organizations described, was designed to identify pressing health needs in the community.¹ Upon providing consent to be interviewed, participants were asked open-ended questions about their organization and the population they serve:

- Identify the biggest health problems in their community
- Prioritize health issues to be addressed
- Describe the factors that affect the health care the community receives
- Describe the health resources their community utilizes in relation to specific health problems
- Identify barriers to, or gaps in, resources provided

¹ Participating organizations include: American Cancer Society, American Diabetes Association, American Heart Association, Catholic Charities, Circulo de la Hispanidad, FECS, Health and Welfare Council of Long Island, Island Harvest, Jewish Association Serving the Aging (JASA), Long Island Council of Churches, Mental Health Association of Nassau County, Perinatal Services Network, Project Independence, Sustainable Long Island, and United Way.

- Identify ways their organization might improve community services and programs.

Interviews were recorded and transcribed. Qualitative data analysis was conducted to identify prevalent themes and emergent themes in responses.

The quantitative assessment was based on a community survey that was widely distributed² in both Spanish and English, in the spring of 2013, eliciting more than 1,000 completed surveys. The criteria for question development began with tested and used surveys as a template guide. Goals and barriers were then incorporated into the questions, as well as demographic information and the use of common terminology versus official public health terminology.

The principle finding of the Nassau County qualitative assessment was in substantial agreement among participants that, prevention of chronic diseases was the most pressing in the county.³ Fully 76.4% of participating organizations regarded prevention of chronic disease as a priority, and 50% regarded it as the number one health priority. An overview of the results follows:

- Diabetes, heart disease and cancer were the most commonly reported chronic diseases of concern
- The health burden of overweight and obesity-related diseases and conditions, such as diabetes and heart disease, is increasing significantly
- Promoting healthy living, especially among the youth, should be a top priority, especially in minority populations with a high prevalence of obesity
- Time and funding should be allocated for prevention rather than solely on treatment
- More outreach to low SES and minority populations is needed to provide education about nutrition and healthy food practices
- There is a lack of awareness of the importance of prenatal care among high-risk populations
- There has been an increase in the prevalence of mental health issues and substance abuse

The survey tool of the Nassau CHNA tabulated results for both the county as a whole and for the “select communities”. Select communities as identified by the Nassau County Department of Health Needs Assessment are considered priority areas and have been focused on for CHS’s Healthy Sundays programs. These areas are: Freeport, Hempstead, Inwood, Long Beach, Westbury, Roosevelt, Uniondale, Elmont and Glen Cove. The CHS Healthy Sundays program provides free health screenings, immunizations and distribution of informational brochures regarding outpatient services offered at St. Joseph and other CHS hospitals.

The following tables compare Nassau County information, select communities and the St. Joseph survey. Results from the Suffolk County CHNA are similar, listing the priorities as

- Obesity/Nutrition
- Chronic Disease Prevention
- Mental Health

² Through Survey Monkey, hospital outreach, public libraries, NCDOH Programs and County Agencies, faith-based organizations, community centers, and social media.

³ These five areas, which are prioritized in the New York State Prevention Agenda are: (1) Prevent Chronic Disease (2) Promote Healthy and Safe Environment (3) Promote Healthy Women, Infants and Children (4) Promote Mental Health and Prevent Substance Abuse; and (5) Prevent HIV, STD, Vaccine Preventable Diseases and Health Care-Associated Infection.

The three most common responses to three key questions are given in the table below:

Nassau County		Select Communities	
What are the biggest ongoing health concerns in your community?			
Cancer	44.0%	Diabetes	40.5%
Obesity/weight loss	36.0%	Drug/alcohol abuse	38.0%
Diabetes	33.0%	Cancer	37.2%
Drug/alcohol abuse	31.9%	Obesity/weight loss	31.8%
What are the biggest ongoing health concerns for you?			
Cancer	35.6%	Cancer	37.2%
Heart Disease	35.0%	Women’s Health	33.8%
Women’s Health	32.7%	Diabetes	30.9%
Obesity	30.8%	Obesity	33.8%
Which of the following is most needed to improve the health of your community?			
Healthy food choice	46.0%	Healthy food choice	44.7%
Weight loss	30.0%	Weight loss	25.8%
Mental health services	20.8%	Drug/alcohol rehab	23.3%
Drug/alcohol rehab	18.8%	Mental health services	20.0%

2. St. Joseph Hospital Local Health Needs Assessment: Process, Methods, and Results

The assessment of needs specific to St. Joseph Hospital’s service area was made on the basis of several sources of data:

- A community health needs assessment survey distributed widely by St. Joseph Hospital throughout the service area resulted in 108 persons completing the survey as of April 2013. It is a 19-question health assessment survey in which respondents were asked about their own health and health concerns/needs and (in the case of one question) those of “you and your neighbors”.
- County data sources such as the Nassau County Health Needs Assessment described above.
- St. Joseph Hospital’s internal records and the firsthand experience of St. Joseph Hospital’s outpatient clinicians.

While the Nassau County survey asks respondents to both comment on their own health concerns and those of the community, the St. Joseph Hospital survey focused solely on the former. The results of two key questions in St. Joseph Hospital’s survey are as follows:

St. Joseph Hospital

What are the top 3 challenges you face?	
High blood pressure	31.48%
Overweight/obesity	30.55%
Diabetes	23.15%
Heart disease	23.15%
What is needed to improve the health of your family and neighbors? ⁴	
Healthier food	57.41%
Wellness services	32.41%
Free or affordable screenings	31.48%
Exercise/physical activity	29.63%

Two additional questions asked what types of health screenings and/or services are needed to keep you and your family healthy and what health issues do you need education about. Some common responses for both questions included: blood pressure, cholesterol, nutrition, exercise/physical activity, diabetes and weight-loss help.

3. Health Needs/Priorities Chosen and Rationale

St. Joseph Hospital’s assessment of the health needs in the area is identified by the county-level CHNA results reported so far and by St. Joseph Hospital’s own survey. Although the hospital recognizes that heart disease and blood pressure screening are important concerns, they are not included among the top five health needs for the reasons cited in the previous section. Further, these needs are addressed during the year when St. Joseph Hospital participates in CHS Healthy Sundays, and blood pressure screenings held at various health care outreach programs. Priority agenda items were selected based upon the survey findings and the ability at St. Joseph:

- to coordinate hospital and community strategies to ensure the most effective use of resources
- build on existing programs and other community assets where possible
- understand root causes of needs being addressed and identify a range of possible interventions
- for each Priority Agenda item selected, identify the goal to be achieved, measure objective(s), and identify how objectives are met
- plan for continued improvement and sustainability of the program

On the basis of the other available information, the following priorities have been identified:

⁴ Non-health-related choices like “recreation facilities” and “safe places to work and play” are omitted from the results reported because as a hospital, St. Joseph’s would not be in the appropriate organization to address such concerns.

1. *Diabetes prevention and control* was rated near the top of identified needs in the CHNA by key informants, the county survey of “select communities” and by the St. Joseph Hospital survey. At St. Joseph Hospital, the Diabetes Education Center program continues to grow and is seeing more patients daily. St. Joseph also offers an outpatient wound care center, which will support diabetes treatment, as well as the hospital’s podiatry services. The objective is to help people who already have diabetes learn to manage it through diet and exercise and offer education to those who are pre-diabetic about the impact diet and exercise have on preventing and controlling diabetes.

2. *Obesity prevention and control* were rated near the top of identified needs in the CHNA by key informants and the Nassau County community survey as well as St. Joseph Hospital’s own community survey. Obesity prevention through better nutritional education is also one of the five Nassau County health priorities designated in the 2010 Nassau County Community Health Assessment. The objective is to help those who are obese or overweight improve their overall health and avoid chronic disease through proper food choices and exercise.

3. *Mental health issues*: although not among the top three responses identified in the CHNA, mental health has been identified as an area of interest for the St. Joseph Hospital service area. In response to the key question: “Which of the following is most needed to improve the health of your community?” mental health services were identified by 20.8% of Nassau County respondents and 20.0% of Select Community respondents. Going forward, St. Joseph will look to collaborate with other CHS facilities and community-based organizations to provide education and resources for those in need of access to services and educational resources.

B. Three-Year Plan of Action

St. Joseph Hospital’s strategic action plan includes the continued promotion and easy access to the St. Joseph Hospital diabetes education program that together with its fully accredited Wound Care Center and Podiatry Services the goal is to address a large population of patients with diabetes. Obesity prevention outreach program and education regarding identification and resources on mental health issues. Also, throughout the implementation period, for each of the priority areas, St. Joseph Hospital will continually address these needs through speaker bureau engagements, support groups, participation in community health fairs and CHS Healthy Sunday’s program, community outreach programs and various screening programs. St. Joseph Hospital will expand its role in events such as Healthy Sundays, the American Heart Association Walk, the Making Strides Against Breast Cancer Walk and the Marcum Workplace Challenge to help promote a healthy, active lifestyle by offering education, screenings and access to resources. Since September 2013 St. Joseph has participated in 6 Healthy Sundays/community health screening programs.

Date	Location	Attendance/Screened	Flu Vaccines	BP Screening	Glucose Screening
9/22/2013	Our Lady of Assumption	170/120	120	0	
11/17/2013	St. Brigid’s	400/209	184	38 (15 HIGH)	
12/8/2013	Our Lady of Loretto	200/139	139	0	
1/26/2014	St. Martha	100/57	39	36 (20 HIGH)	
2/8/2014	St. Kilian’s	Canceled – weather	0	0	

3/30/2014	Our Lady of Assumption	76/41	0	41 (33 HIGH)	
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1. Addressing Priority 1: Diabetes Education and Control The priority is to Increase Access to High Quality Chronic Disease Preventive Care and Management.

Goal 1: *Achieve wider dissemination of culturally relevant chronic disease self-management education for diabetes.*

Strategy: St. Joseph Hospital plans to further promote the outpatient Diabetes Education Program. This initiative will allow certified diabetes educators, along with a certified translator, to deliver free community programs to raise awareness of both diabetes and the resources available at St. Joseph Hospital and support all areas of diabetes care, management and education in various locations, targeting high-risk populations. These presentations will be designed to impart information about the risk of diabetes, as well as provide resources for care and education for those with diabetes; pre-diabetes awareness classes and monthly diabetes support groups will be available. St. Joseph will work with LIHC by attending regional meetings, accessing additional services through other CHS facilities and LIHC members and using the universal screening tool developed by LIHC. St. Joseph Hospital, a member of Catholic Health Services of Long Island, will continue to provide access for free health care to the uninsured and underserved through Healthy Sundays and the Bishop McHugh Health Care Center located in Hicksville, New York. In addition to the diabetes support groups, beginning in January 2014 a Center for Disease Control (CDC) Diabetes Prevention Recognized Program (DPRP) is being offered. The program focuses on how to recognize PreDiabetes, learn how to prevent Type 2 Diabetes and future complications. The program runs one evening a week for 16 weeks from 6/10-9/23/2014, and continues one evening a month from 10/28/2014-5/26/2015. The program is presented by registered dietitians and certified diabetes educators, provides a full year of education and an evening program is available. There are 5 participants in the current group.

Measurable Objective: By December 31, 2017, increase access and awareness of the diabetes education services offered at St. Joseph Hospital. The exact percentage and the precise definition of the relevant population will be determined in the course of detailed planning as a result of the data collected monthly, and reported quarterly, at the Performance Improvement and Patient Safety (PIPS) committee meetings. This is an ongoing process. A measurable objective will be to increase enrollment each of the three years of this plan, which will be assessed by tracking the number of attendees at lectures, screenings at health fairs, free programs and enrollment and completion of the Diabetes Prevention Education Program.

Goal 2: *Implement wider use of evidence-based care to manage diabetes.*⁵

⁵ This is suggested goal #3.2 for this Focus Area at www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/chronic_diseases/focus_area_3.htm#goals.

Strategy : Diabetes can cause a variety of complications, including increased risk of cardiovascular problems (heart attack or stroke), neuropathy (nerve damage), nephropathy (kidney damage) and retinopathy (eye damage); foot problems and wounds that won't heal, the last two of which frequently lead to amputation. St. Joseph Hospital is currently in the process of implementing or expanding services to address the following:

- Expanding the established ambulatory Outpatient Podiatry Service.
- Expanding the Wound Care Center that operates in conjunction with a Hyperbaric Center fully accredited by the Under Sea and Hyperbaric Medical Society (UHMS) – a complimentary regulatory body of the Joint Commission.
- Increased access to information through free lectures, Healthy Sundays and health screenings to raise awareness of the risk of diabetes in high-risk populations and help address health disparities in populations affected by this disease, as well as provide resources for care and education for those with diabetes to better deal with and prevent the chronic complications associated with diabetes.

St. Joseph's Podiatry and Wound Care Departments work together to impact the treatment of patients with diabetes. For example, delayed wound healing is one of the most common complications associated with both type 1 and type 2 diabetes. If left untreated, wounds can lead to infection, amputation and even death. In fact, diabetes is the leading cause of non-traumatic lower limb amputation in the United States. The most frequent cause of these wounds is a diabetic foot ulcer, which is an open sore or wound that occurs in approximately 15% of patients with diabetes. Approximately 14–24% of patients with diabetes who develop a foot ulcer will require an amputation. Foot ulceration precedes 85% of diabetes-related amputations. Research has shown, however, that the development of a foot ulcer is preventable⁶. Thus, the combination of the hospital's Outpatient Podiatry Services and Wound Care Center will continue to provide an important weapon in St. Joseph Hospital's arsenal in the fight against diabetes and its related complications. In addition, obesity reduction and diabetes self-management are closely linked due to the shared relationship between obesity and diabetes.

Measurable Objective: By December 31, 2017, reduce the rate of hospitalizations for acute diabetes complications by educating the community through free health screenings, Healthy Sundays and free lectures. The exact percentage and the precise definition of the relevant population will be determined in the course of detailed planning as a result of the data collected monthly, and reported quarterly, at the Performance Improvement and Patient Safety (PIPS) committee meetings. The objective is to increase access to programs for high-risk populations and thereby decrease the incidences of severe complications. This is an ongoing process.

2. Addressing Priority 2: Obesity prevention, control and treatment. This priority is part of the *Prevent Chronic Diseases* Prevention Agenda item under Focus Area "Reduce Obesity in Children and Adults."

Goal 1: *Expand the role of health care and health service providers and insurers in obesity prevention.*

⁶ American Podiatric Medical Association website, www.apma.org/Learn/FootHealth.cfm?ItemNumber=981

Strategy: St. Joseph Hospital’s strategy has a screening/referral component and an outreach education component. Starting January 12, 2014, all diabetes education centers within CHS will have prediabetes programs (Pre-DM). There will be a program free of charge available, as well as a fee for service program, and will address obesity and pre-diabetes. The focus will be on the adult population. All diabetes education centers are recognized by the Centers for Disease Control (CDC) as National Diabetes Prevention Program sites. St. Joseph will increase participation in local school district programs such as the student initiative “Get Fit” program; enhance services within the diabetes education department and services.

The Bethpage School District was approached by a local organization, Lift Up Long Island, to have a student driven health and wellness program. Students from each Bethpage school attended a training session with students from many other schools around Long Island. Schools were asked to consider a problem to tackle and Bethpage students chose health and wellness. The goals are to have the entire community involved in the pursuit of healthier lifestyles, for families to have more nutritious diets and more active lifestyles and that they (schools and communities) all do it together. St. Joseph will participate in the calendar of community events to begin in the fall 2014. Most events will be free and open to everyone. The calendar includes, but is not limited to: classes in pilates, yoga and zumba, family “Walk the Track Night”, family zumba class on the front lawn of Bethpage High School, and the Bethpage 5K race. The hospital will explore the possibility of partnering with a community organization/parish to offer a safe walking program. Continue and expand participation in community fitness-focused activities such as the Marcum Workplace Challenge, the American Heart Association Walk and the Making Strides Against Breast Cancer Walk. St. Joseph will work with LIHC by attending regional meetings; promoting the “Walk LI” walking program project via the hospital website, newsletters and social media; and using the universal screening tool developed through LIHC.

Measurable Objective: By December 31, 2017, increase the percentage of adults 18 years and older who have been screened and counseled for obesity within the past three years. Engagement with the local school district will provide enrollment information through its school-based “Get Fit” activities. St. Joseph Hospital looks to build a program in the area of nutritional education. The exact percentage and the precise definition of the relevant population will be determined in the course of detailed planning and will be measured on a monthly basis.

3. Addressing Priority 3: Mental health issues. This priority was chosen, as it has been identified as an area of interest for the St. Joseph service area. In the Nassau County survey, 20.8% of the respondents felt mental health services were needed to improve the health of the community.

Goal: *Increase the frequency of mental health-oriented lectures and presentations providing information and education to the SES communities.*

Strategy: St. Joseph Hospital plans to provide free lectures to the community on mental health issues. Currently, St. Joseph Hospital does not offer mental health services; however, the hospital has a successful bereavement group that meets twice a week. The program addresses depression through loss and acts as a referral source for those with additional needs. The goal in this area will be to provide additional information, education and resources on certain aspects and

challenges in the mental health arena and, when a lack of access to mental health resources is identified, help direct those in need to other CHS or Nassau facilities that have mental health programs in place. St. Joseph will work with LIHC by attending regional meetings.

Measurable Objective: By December 31, 2017, increase the amount of mental health information and education provided to the community, as well as referrals to established programs, as needed. The exact percentage and the precise definition of the relevant population will be determined in the course of detailed planning in the fall of 2013, with the first free lecture to be scheduled for December 2013. Statistics on the bereavement group attendance and frequency will be maintained to assess its success, and hospital staff will continue to facilitate referrals to other CHS hospitals with mental health programs and other outside agencies.

To date St. Joseph Hospital has hosted 5 - 6 week general bereavement group programs for those who have had a loss within a year, with an average of 6-8 participants per program. Three out of the five extended their meetings to 8 week sessions, as they found the program beneficial. In response to community inquiries, an evening program has begun with the most recent spring/summer sessions. A new support group entitled “Next Steps” has formed as a follow up to the general bereavement group helping to establish a “new normal”. Information regarding availability of the programs has been promoted in local parish bulletins, local papers and on the St. Joseph hospital website www.stjosephhospitalny.org

Pre-registered	No-shows	Dropped Out	Completed Program
41	10	4	27

C. Dissemination of the Plan to the Public

The Community Service Plan will be made available to the public through the following means: St. Joseph’s website www.stjosephhospitalny.org under the “About Us” section, summaries to individual residents via the community newsletter, civic groups will be provided copies upon request, and direct mailing to physicians. The summaries will highlight key information regarding St. Joseph Hospital programs, including the Prevention Agenda priorities. In addition, the plan was shared with the public at Adelphi University’s fall symposium, “Public Health in the Suburbs, Part 2: Medical Centers Meeting Community Health Needs”, on Nov. 8, 2013, with extended coverage across the Long Island region through the diocesan website www.drvc.org) and TV Station www.telecaretv.org

D. Process for Maintaining Continued Engagement with Partners and for Tracking Progress.

- Program tracking for each of the chosen priorities will be discussed with community-based organizations (CBOs) who are fellow members of LIHC and made a permanent record through the minutes of the meetings.
- Efforts will be made to identify and join any related activities being conducted by others in the community that could be built upon.
- LIHC will continue to meet regularly throughout the three-year term of the plan to review progress reported by all members, including progress on the “Walk LI” walking program project, and the LIHC survey tool. The membership will share successes, strategies for improvement, and possible enhancement projects for increased community health and awareness.
- The hospital’s Mission & Ministry Committee will have input as to the implementation of the Community Health Needs Assessment and Community Service Plan.
- Build support within the community for the identified initiatives by building partnerships with schools and local merchants to assist with education on healthier food choices and exercise.
- Implement plans for engaged sustainability throughout the community by working with CBOs and continually reassessing the needs identified.

III. Conclusion

St. Joseph Hospital regards this Community Service Plan as a special opportunity to promote excellence in care and commitment to those in need, to further the hospital’s outreach to the community, and to strengthen its capacity to bring a brighter future to those served. St. Joseph Hospital will strive to expand and further promote free health and prevention/education screenings and programs. The goal is to offer additional programs where they are most needed, and St. Joseph is committed to continuing to develop more ways to better serve the community.