

# Madison County CHA 2019

## Local Public Health System & Forces of Change Assessments Event Summary

The Madison County Department of Health (MCDOH) in collaboration with Oneida Healthcare and Community Memorial Hospitals hosted a one-day event for community partners. The purpose was to gather diverse community input as part of the Mobilizing for Action through Planning and Partnership (MAPP) Community Health Assessment process. There were 77 participants, representing 43 community organizations (e.g. healthcare services, school districts, non-profits, colleges, and libraries). There were also two individuals from Senator May's office. In addition to ten MCDOH staff, the event had representation from the following County departments: County Administration, Social Services, Sheriff's Office, Planning, Mental Health, Youth Bureau, and Emergency Management.

### Local Public Health System Assessment

The Local Public Health System Assessment (LPHSA) focuses on all of the organizations and entities that contribute to community health. The LPHSA answers the questions: "What are the components, activities, competencies, and capacities of our local public health system?" and "How are the Essential Services being provided to our community?"

Participants listened to a presentation on the Ten Essential Public Health Services before breaking out into 10 groups. MCDOH staff members acted as table facilitators to guide participants through the LPHS Assessment; each group focused on one essential service.

#### The Ten Essential Public Health Services

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

The goal was to identify opportunities to improve our LPHS by rating the current system based on the model standards provided by the National Association of County and City Health Officials (NACCHO). The participants used the following rating system to quantify how well the LPHS carries out the selected essential service:

<b>Optimal Activity</b>	Greater than 75% of the activity described within the question is met
<b>Significant Activity</b>	Greater than 50%, but no more than 75% of activity described
<b>Moderate Activity</b>	Greater than 25%, but no more than 50% of activity described
<b>Minimal Activity</b>	Greater than 0, but no more than 25% of the activity described
<b>No Activity</b>	0% or absolutely no activity

## Performance Assessment Results

Meeting participants were assigned to groups based on their organization and involvement with each essential public health service. The groups reviewed and categorized the activity level through facilitated discussion and voting. Below is a summary of the combined results. Services in Madison County were ranked as either significant activity or moderate activity. The lowest scoring was “Inform, Educate, and Empower People about Health Issues” with an activity level of 41.7%. The highest scoring was a tie between “Mobilize Community Partnerships to Identify and Solve Health Problems” and “Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable” both scoring an activity level of 62.5%. These scores will be taken into account when developing specific interventions for the Community Health Improvement Plan (CHIP).

<b>Ten Essential Public Health Services</b>		<b>Performance Scores</b>
1	Monitor Health Status to Identify Community Health Problems	58.3
2	Diagnose and Investigate Health Problems and Health Hazards	50.0
3	Inform, Educate, and Empower People about Health Issues	41.7
4	Mobilize Community Partnerships to Identify and Solve Health Problems	62.5
5	Develop Policies and Plans that Support Individual and Community Health Efforts	43.8
6	Enforce Laws and Regulations that Protect Health and Ensure Safety	58.3
7	Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	62.5
8	Assure a Competent Public and Personal Health Care Workforce	50.0
9	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-based Health Services	50.0
10	Research for New Insights and Innovative Solutions to Health Problems	50.0
<b>Average Overall Score</b>		<b>52.7</b>

Essential Public Health Service #1: Monitor health status to identify and solve community health problems.

Essential Public Health Service #1	Score
<b>Monitor Health Status To Identify Community Health Problems</b>	<b>58.3</b>
1.1 Population-Based Community Health Profile (CHP)	75.0
1.2 Access to and Utilization of Current Technology to Manage, Display, Analyze and Communicate Population Health Data	50.0
1.3 Maintenance of Population Health Registries	50.0

### Discussion Themes

1. *Gap in Knowledge*: Disparity between organizations who know exactly how to access and use data, while other organizations do not; community members are often excluded from CHA process and outcomes
2. *Presentation of Data*: Difficult to consume data in current presentation; need to focus on take-away messages rather than data overload

### Opportunity for Improvement

1. Short-term:
  - a. Recognize the target audience and communicate CHA results appropriately (i.e. service providers versus community members)
2. Long-term:
  - a. Share information about CHA process from Day 1 via media outlets and town hall meetings
  - b. Improve county-wide capacity for technology

Essential Public Health Service #2: Diagnose and investigate health problems and health hazards

Essential Public Health Service #2	Score
<b>Diagnose And Investigate Health Problems and Health Hazards</b>	<b>50.0</b>
2.1 Identification and Surveillance of Health Threats	50.0
2.2 Investigation and Response to Public Health Threats and Emergencies	50.0
2.3 Laboratory Support for Investigation of Health Threats	50.0

### Discussion Themes

1. *Varying Awareness Level*: Some participants were not aware of any tracking activities, while others knew about many activities
2. *Emergency Preparedness*: Reduced community involvement; each agency has their own process, but may not work together; ready for large scale emergencies rather than smaller ones
3. *Fewer Resources*: No mobile clinics; 24/7 lab access is difficult to find; communities do not have unique emergency response teams

### Opportunity for Improvement

1. Short-term:
  - a. Improve appropriate and timely communication from emergency preparedness agencies rather than social media
2. Long-term:
  - a. Increase inter-sectoral collaboration to improve data collection, reporting, and how we serve the public
  - b. Incorporate ongoing education to increase awareness of health and safety investigation/response

## Essential Public Health Service #3: Inform, educate, and empower people about health issues

Essential Public Health Service #3	Score
<b>Inform, Educate, And Empower People about Health Issues</b>	<b>41.7</b>
3.1 Health Education and Promotion	50.0
3.2 Health Communication	50.0
3.3 Risk Communication	25.0

### Discussion Themes

1. *Great Services, Ineffective Communication:* Madison County already has great services, which meet model standards; however, community needs a unified platform for effective communication for greater utilization of services. Community organizations should look through the consumer lens for communication and outreach methods. The same is true for risk communication – COAD is setting up a system; yet, people are underinformed and are not involved. The focus tends to be on nearby cities rather than Madison County; this community needs more “content experts” or current organizations need to have more face-time with the community.

### Opportunity for Improvement

1. Short-term:
  - a. Develop unified platform for communication of services using the appropriate media source to community members
  - b. Establish regular communication between health-focused organizations (i.e. constant contact emails, coalition meetings)
  - c. Incorporate epidemics into COAD initiative
2. Long-term:
  - a. Develop a phone app to relay county-wide emergency information
  - b. Continual education for community members and agencies on health information and local activities supporting those issues.
  - c. Research and implement model practices for relaying information across Madison County

## Essential Public Health Service #4: Mobilize community partnerships to identify and solve health problems

Essential Public Health Service #4	Score
<b>Mobilize Community Partnerships to Identify and Solve Health Problems</b>	<b>62.5</b>
4.1 Constituency Development	75.0
4.2 Community Partnerships	50.0

### Discussion Themes

1. *Community that Rallies:* There is a willingness to work together among organizations in Madison County; when something needs to happen, they can rally together to do so. However, efforts are often disjointed or geographically isolated.

### Opportunity for Improvement

1. Short-term:
  - a. Launch an initiative similar to Madison County’s Promise & Priorities Council (countywide coalition for healthy outcomes) without grant funding attached to it; community partners can commit to a coordinated process with concrete goals and seek grant funding to address health needs.

- i. Coalition would facilitate a process of “we’re here to resolve this issue.” Make a decision and implement it; transition to a systematic process to promote forward movement.

## Essential Public Health Service #5: Develop policies and plans that support individual and community health efforts

Essential Public Health Service #5	Score
<b>Develop Policies and Plans that Support Individual and Community Health Efforts</b>	<b>43.8</b>
5.1 Government Presence at the Local Level	50.0
5.2 Public Health Policy Development	50.0
5.3 Community Health Improvement Process	50.0
5.4 Plan for Public Health Emergencies	25.0

### Discussion Themes

1. *Money Talks*: Policy development is segmented by individual organizations and is associated with funding streams rather than the needs of the community.
2. *Lack of Awareness*: Most participants did not know what the standards referred to, demonstrating a lack of awareness at both a community and organizational level. Although many LPHS organizations are doing great work, other organizations are left out of the process and do not know what efforts exist.

### Opportunity for Improvement

1. Short-term:
  - a. Educate community members on the importance of policy development
  - b. Keep community organizations in the loop when conducting the CHA/CHIP rather than health department and hospitals only; these documents should inform the priorities of all LPHS.
  - c. Consider DSRIP funding (spring 2020)
2. Long-term
  - a. Centralize emergency planning efforts and communicate the information to community members and organizations alike.

## Essential Public Health Service #6: Enforce laws and regulations that protect health and ensure safety

Essential Public Health Service #6	Score
<b>Enforce Laws and Regulations that Protect Health and Ensure Safety</b>	<b>58.3</b>
6.1 Review and Evaluate Laws, Regulations, and Ordinances	50.0
6.2 Involvement in the Improvement of Laws, Regulations, and Ordinances	50.0
6.3 Enforce Laws, Regulations and Ordinances	75.0

### Discussion Themes

1. *Unique policies for unique County*: There is an overwhelming feeling that many State laws consider NYC rather than rural upstate NY; funding is not available until the state identifies issue as a public health threat. Madison County has an opportunity to adopt and enforce stricter policies than the state (i.e. immunization requirements).
2. *Implementation Support*: Organizations receive the most support to implement laws and regulations from the County, followed by State, and Federal government. Local efforts should be made to enforce and educate the community on existing policies rather than creating new ones.

## Opportunity for Improvement

1. Short-term:
  - a. Improve educational effort to the community through forums, schools, public panels.
2. Long-term
  - a. Improve methods of communication the implementation and enforcement of laws/regulations/ordinances.

## Essential Public Health Service #7: Link people to needed personal health services and assure the provision of health care when otherwise unavailable

Essential Public Health Service #7	Score
<b>Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable</b>	<b>62.5</b>
7.1 Identification of Populations with Barriers to Personal Health Services	75.0
7.2 Assuring the Linkage of People to Personal Health Services	50.0

## Discussion Themes

1. *Barriers to Health*: The group identified many barriers that community members experience (i.e. insurance costs, transportation, services no longer available, and stigma); Madison County's LPHS is well versed in recognizing barriers and many organizations are addressing those needs.
2. *Ineffective Collaboration*: There is an opportunity to improve connectedness of community organizations serving similar populations and addressing gaps in services.

## Opportunity for Improvement

1. Short-term
  - a. Identify lead organization and methodology to increase cross-sector communication and better serve community members.
  - b. Adapt health communication materials to address populations with lower literacy levels.
2. Long-term
  - a. Identify and implement opportunities to reduce barriers to health, including transportation and high medical costs.

## Essential Public Health Service #8: Assure a competent public and personal healthcare workforce

Essential Public Health Service #8	Score
<b>Assure a Competent Public and Personal Health Care Workforce</b>	<b>50.0</b>
8.1 Workforce Assessment Planning, and Development	50.0
8.2 Public Health Workforce Standards	50.0
8.3 Life-Long Learning Through Continuing Education, Training, and Mentoring	50.0
8.4 Public Health Leadership Development	50.0

## Discussion Themes

1. *Local Efforts, Lack of Communication*: Great efforts among organizations to assure a competent public health workforce; however, these are not communicated with other agencies.
2. *High Standards, Gaps in Staff*: NYS sets high standards for public health workforce qualifications. Given the rural setting, it is difficult to fill positions with qualified staff, which leads to staff taking on responsibilities beyond their qualifications/skills. Staff are reluctant to accept leadership roles and professional development opportunity, despite encouragement from management.

## Opportunity for Improvement

1. Short-term:
  - a. Improve communication/sharing/promotion of available resources for trainings and leadership opportunities.
  - b. Provide cultural competence trainings related to diversity at all levels (i.e. socioeconomic, gender, race/ethnicity).
2. Long-term
  - a. Increase the implementation of cross training among organizations.
  - b. Identify and implement recruitment/retention strategies for staff in rural setting.

## Essential Public Health Service #9: Evaluate effectiveness, accessibility, and quality of personal and population-based health services

Essential Public Health Service #9	Score
<b>Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services</b>	<b>50.0</b>
9.1 Evaluation of Population-based Health Services	50.0
9.2 Evaluation of Personal Health Care Services	50.0
9.3 Evaluation of the Local Public Health System	50.0

## Discussion Themes

1. *Gold Standards, Lack of Awareness:* Despite many organizations performing at a high level of service (i.e. increase use of EMRs, technology), there is a general lack of awareness among other community partnerships and residents. When surveyed, community members rate population-based health services high overall.
2. *Limited Access:* Given the barriers to internet and transportation, community members do not always benefit for the high caliber services in the area. Specialty services are confined to larger cities outside of the county.

## Opportunity for Improvement

1. Short-term:
  - a. Promote education on the services available to community members
  - b. Implement trauma-informed care among healthcare providers
  - c. Increase the communication of services to community partners and members

## Essential Public Health Service #10: Research for new insights and innovative solutions to health problems

Essential Public Health Service #10	Score
<b>Research for New Insights and Innovative Solutions to Health Problems</b>	<b>50.0</b>
10.1 Fostering Innovation	50.0
10.2 Linkage with Institutions of Higher Learning and/or Research	50.0
10.3 Capacity to Initiate or Participate in Research	50.0

## Discussion Themes

1. *Lack of Community Input:* Research efforts should be focused on needs identified by community participation.
2. *Expand Communication:* Local institutions are conducting research and using the results to impact health outcomes; however, there is a lack of communication to the general public or to other organizations, who could utilize the results.
3. *Limited Resources:* Particularly outside of academia, there are limited funding and staff resources for research. There is an opportunity for collaboration between local organizations to overcome this barrier.

## Opportunity for Improvement

1. Short-term:
  - a. Promote HealtheConnections as a best practice website
  - b. Promote awareness of internship opportunities, which provide professional development for individual and temporally increase organizational capacity.
  - c. Increase training and collaboration opportunities among college/universities and other research organizations with local organizations.
2. Long-term
  - a. Formalize process for community-based research (i.e. research theme of the year)
  - b. Utilize data sharing agreements between organizations for research
  - c. Evaluate the impact of Ten Essential Services
  - d. Public annual report card to engage, show, and promote local research initiatives; identify best practices and areas for improvement (SWOT; Cortland County example)

## Forces of Change Assessment Results

The second part of the day focused on the Forces of Change Assessment (FOC). The FOC Assessment identifies all of the forces and associated opportunities and threats that can affect the community and local public health system. Forces can be trends, factors, or events occurring either now or in the future. Each group was asked to identify factors through small group facilitated brainstorming. The results are listed below:

### Forces of Changes Impacting the Health of Madison County

	Events	Factors	Trends
<b>Economic</b>	Opening of casino	Generation Z entering workforce	Decrease in monetary resources in public health
		Rising taxes	Decreasing number of farms
		Increase in poverty	Increase in farmers markets
			Increasing use of urgent care & ER
			Lower unemployment rate
			Decrease in housing values
			Decrease in number of jobs
			Increase in healthcare costs & insurance
<b>Environmental</b>	Flood 2013	Food desert	Climate change
	Potential natural disasters	Limited access to stores	
		Weather	
		Transportation Issues	
<b>Legal/Political</b>	Marijuana legalization	Political climate	
	Acts of terrorism	State & federal regulations	
	Increase minimum wage		
	Immigration policies		
	Prison reform		
	Healthcare reform		
	Universal healthcare		
<b>Social</b>	Opioid epidemic	Lack of assisted living facilities	Increase in aging population
	School shooting events	High prevalence of substance abuse	Decrease in vaccine use
	Possible hospital closures	Uneven distribution of health care providers	Vaping (particularly among young people)
	Emergency services merge	Intergenerational issues	Fewer young volunteers (i.e. EMS, police)
	Possible closure of Planned Parenthood	Decrease in providers who accept Medicaid	Desire for instant access to medical providers
		NYS - 2nd most moved out of state	Rise in homelessness
		Lack of diversity	Rise in sex trafficking
		Limited access to dental health providers	Increase in mid-level healthcare providers
			Increase in specialty doctors rather than general practice
			Younger generation's impact on healthcare
			Decrease school population
			Increase in anxiety and depression in youth
			Increase in awareness and acceptance of mental health issues
		Growing awareness of LGBTQ+ population & needs	
<b>Technological/Scientific</b>	Regional healthcare systems	Limited access to internet	Focus from general to specialty health care
		Advances in science & technology	Increase in local access to specialists through satellite offices
		Advances in medical care	Implementing EMRs
		Advances in social media	Decrease in knowledge of services



## Top Five Themes

Force of Change		Number of Group Discussions
1	Increase in Aging Population	9
2	Addiction/Substance Use	6
3	Advancements in Science & Technology	6
4	Legalization of Marijuana	6
5	Diminishing Healthcare Services	5

## Threats & Opportunities

### Increase in Aging Population

#### Threat

- Increased healthcare costs and need for more healthcare providers
- Population is disconnected with technology
- Lack of adequate and affordable housing (i.e. assisted living facilities)
- Population is on fixed income
- Risk of losing or increasing cost of social security
- Lack of transportation to medical services
- Lost experience in the workforce as this population retires
- Less people working; decreased workforce in healthcare and money to pay
- Out migration of young and in migration of older populations creating an increased burden on tax and social services
- Insurance increases with older population due to comorbid diagnoses (i.e. chronic disease management) and increase in life expectancy
- Specialty care needed (i.e. memory units, day centers)

#### Opportunity

- Aging population has the time to volunteer to share their skills and knowledge, and ability to act as good mentors
- Need for healthcare providers may lend to more flexibility in the workforce for job sharing.
- Technological advances in medical have improved health outcomes and quality of life
- Programming for aging population to increase socialization rather than isolation and loneliness
- Focus on chronic disease management
- Repurpose and retain workforce and take advantage of and transfer expertise to younger populations
- Aging in place – opportunity for home healthcare agencies to serve population

### Addiction & Substance Use

#### Threat

- Opioid epidemic has resulted in premature deaths and other adverse effects on community (i.e. child neglect)
- Vaping has become popular, particularly among young people. Advertising is misleading, does not emphasize that contains nicotine and the long-term effects remain unknown
- Substance abuse impacts all levels of society- rich, poor, different levels of education, all ages
- Increased medical costs associated with drug use, both legal and illegal
- Illegal drugs can contain synthetic, lethal substances that users may not be aware of

- Safety risks to public
- Stigma around drug use and addiction still remains
- Economic impact to put the programs in place to address the issue (i.e. medical cost, education, prevention)

#### Opportunity

- Organizations have increased education about the harmful/addictive effects of nicotine (vaping)
- Drug addiction treatment is available in mobile units
- Medication is available to counteract drugs
- Services available inpatient/outpatient
- Community awareness and education is increasing
- Treatments are flexible – what works best for patient
- Crisis teams available 24/7
- Support groups, hotlines
- Opioids: legislation to change how scripts are written out and reinforced by insurance companies
- New research on best interventions

### Advancements in Science & Technology

#### Threat

- Push back from those who do not want their information stored electronically and fear inadequate security measures
- Updating process to EMRs and other technology can be expensive and time consuming
- Isolates aging population from younger generations, who are more knowledgeable about technology
- Lack of internet access and regular power among county residents could prevent utilization of new technology in healthcare
- Difficult to take advantage of new healthcare options without increase infrastructure to support new technologies; may encounter compatibility issues

#### Opportunity

- Increased consumer accessibility through EMRs and online platforms
- Medical technology has created less invasive procedures (i.e. microscopic surgery), which lends to shorter recovery time and less pain medicine
- Lower costs due to less work and materials needed in the long run
- Environmentally friendly
- Improved record of controlled substances (less misuse)
- Local primary preventative care systems (tied to regional systems) to provide more and closer care
- Improve access to public health data online (e.g. HealthConnections, NYS Dashboard)

### Legalization of Marijuana

#### Threat

- Increase the use of marijuana while driving
- Difficult to regulate for recreational use
- Long-term effects of marijuana use is unknown (i.e. chemical makeup, different strains)
- May increase use among all ages, especially young people

## Opportunity

- Medical benefits can improve the quality of life for many people
- Potentially safer given the opportunity to regulate products
- Provides opportunity to conduct research on health and societal effects
- Decrease the prison population because non-violent drug offenders will no longer be incarcerated; therefore, lower taxpayer burden
- Increase revenue

## Diminishing Healthcare Services

### Threat

- Lower numbers of dental, primary care, mental health providers in community
- Fewer providers accept Medicaid or private insurance
- Increase travel time to appointments
- Consolidation of healthcare services – difficult to communicate where and how to get services
- Loss of employment
- Lack of choice

### Opportunity

- Subsidizing the healthcare providers
- Incentives for providers to stay in Madison County
- Consider federal and state funding
- Incentivize providers in rural communities (i.e. medical school loan forgiveness program)
- Quality not quantity (i.e. measure and reward for improved outcomes)
- Telemedicine