Nathan Littauer’s Planning & Implementation Strategies
Assessment and action

“Hospitals face a paradigm shift: from planning service delivery to population-based community health planning. [This] is a two step process: assessment and action.”

Some clarification

- **CHNA- Community Health Needs Assessment**
  Completed in the summer

- **CSP- Community Service Plan**
  Filed with NYS Department of Health November 15, 2013

- **Implementation Strategy**
  IRS New Affordable Care ACT Due December 31, 2013
Why do we care? (excellent question)

Implementation Strategies are now a Federal Requirement

☐ IRS Notice 2011-52
☐ IRS Form 990, Schedule H
☐ Good Practice
A definition:

What is an Implementation Strategy?

- Must tailor the description to the particular hospital, taking into account its specific programs, resources and priorities (for example, programs and resources the hospital intends to commit)

- Adopted by governing body, or other authorized body

- Attached to IRS Form 990, Schedule H
Good practice?

Good Practice according to the IRS

- Coordinate hospital and community health improvement strategies
- Give priority to low-income and disadvantaged persons
- Build on existing programs and community assets
- Build evaluation into plans
- Use evidence-based interventions
What does the implementation strategy have in it?

1. Describes how hospital plans to meet each identified community health need (or explains why the hospital does not intend meet a given need)

2. Identifies programs and resources, and anticipated impact

3. Describes any planned collaboration

4. Approved by “authorized governing body” of the hospital organization
What has Littauer done?
Meetings! Meetings! Meetings!

In action

Public Health and Nathan Littauer met to review and select priorities based on data July 19, 2013

Stakeholders meet to discuss community health issues at Nathan Littauer. May 23, 2013

Hospital leadership take in data findings
For NYS we chose two action items: Diabetes and lead poisoning

Diabetes:

Who We Plan to Serve (per ADA standards) Adults age 45 and older and at risk adults age 18 and older

Why We Are Doing This?

- According to NYS DOH data, an estimated 8% Fulton County adults have been diagnosed with diabetes, this equates to more than 3,400 people. While determining an accurate number of undiagnosed persons is not possible, we know that diabetes is more common in the elderly and those with a BMI of $\geq 35$.

What will we do?

- Health Link Littauer and Fulton County Public Health staff will coordinate to increase the use of the ADA DM Risk test and refer at risk persons for follow up
- Littauer Primary Care (PCC) will use the EMR to flag those at risk and in need of testing and invite them to be screened
- Increase community awareness of risk factors and need for testing by media campaigns and targeted outreach

What We Hope to Achieve

- Increased awareness of diabetes and it’s risk factors as evidenced by pre/post test
- Increased number of screens. By December 31, 2017, increase the percentage of adults 18 years and older who had a screening for diabetes (per ADA standards) within the past three years by 5% from 58.8% (2011) to 61.7%. And by 2% by Dec 2015
## Child Lead Screening

Fulton County has an extremely high rate of childhood lead poisoning. Our first step in addressing this problem is to improve child lead screening rates which will allow at risk children to be identified and treated.

### Why We Are Doing This
Increasing screening rates will allow at risk children to be identified and treated, reducing the number of children diagnosed with lead poisoning.

Providing POC testing will improve access, the disparity identified in our CHNA.

Activities associated with increasing screening rates will also bring attention to older housing stock and other causes of lead poisoning.

### What We Plan to Do
- Coordinate efforts with Fulton County Public Health (FCPH), which has identified lead poisoning as an agency priority and has received a grant to help address it.
- Establish baseline number of tests using peds primary care data and/or Lead Web.
- Establish baseline level of awareness of lead poisoning risk and dangers by e-survey, repeat yearly.
- Expand POC lead testing in our pediatric primary care offices from two sites to four in 2014.
- Utilize EMR in peds practices to trigger screening.
- Assess need for and deliver provider education in coordination with FCPH and NL CME coordinator. Invite Montgomery County peds providers.
- In coordination with FCPH carry out:
  - Media campaign including: billboards, social media, postcards mailed to all new moms, infomercial for public access, web sites peds waiting rooms.
  - Targeted outreach education at events such as home shows, rabies clinics or car seat checks; and to WIC, Day Care Centers, Head Start sites, Navigators. Include random pre/post tests.
- FCPH will coordinate reaching providers and children not in our PC system.
- Monitor expenditures as they relate to objectives.
- Meet at least twice a year to review plan and assess progress.
- Other potential partners include: Herkimer District Office DOH, Maternity / Peds unit supervisors, WIC, Head Start, Day Care Providers, Family Counseling Center, NE Parent & Child, OB & Peds providers, Department of Social Services, Planned Parenthood, Chamber of Commerce, Benjamin Moore, local hardware stores, grocery stores, Walmart.

### What We Hope to Achieve
#### Outputs
- Number of tests uploaded into Lead Web and/or performed by peds providers (via Medent).
- Provider education (date, topic, attendance).
- Measure of media reach (number & type of coverage).
- Measure of targeted outreach (date, event/activity, attendance, pre/post tests).
- E-Survey results.

#### Outcomes
- Increased awareness of lead poisoning risk and dangers as evidenced by pre/post-test and e-survey.
- Increased number of lead tests performed. (By December 31, 2017, increase the proportion of NYS children who receive lead screening (as a key recommended preventive health service) as part of routine well-child care by at least 10% ... and 4% by 2015).
- Long term: Decreased rate of child lead poisoning as evidenced by DOH indicators (although initially incidence may increase as more screens are done).

### Who We Plan to Serve
- Infants and young children.
### Focus Area

#### Reduce obesity in children and adults
- Adirondack Medical Center
- Alice Hyde Medical Center
- Essex County Public Health
- Franklin County Public Health
- Fulton County Public Health
- Glens Falls Hospital
- Inter-Lakes Health
- Washington County Public Health

#### Increase access to high quality chronic disease preventive care and management in clinical and community settings
- **Nathan Littauer Hospital (Diabetes)**
- Saratoga Hospital
- Warren County Public Health
- Hudson Headwaters Health Network

#### Promote mental, emotional and behavioral health (MEB)
- Champlain Valley Physicians Hospital
- Clinton County Public Health

### Other hospitals:
- Adirondack Medical Center
- Alice Hyde Medical Center
- Essex County Public Health
- Franklin County Public Health
- Fulton County Public Health
- Glens Falls Hospital
- Inter-Lakes Health
- Hudson Headwaters Health Network
- Warren County Public Health
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<td>Vaccine preventable diseases</td>
<td>• Saratoga County Public Health</td>
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<td>Built environment</td>
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<td>• Champlain Valley Physicians Hospital</td>
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<td>• Clinton County Public Health</td>
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<td>Child Health</td>
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<td>Sexually Transmitted Diseases (STDs)</td>
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<td>Healthcare associated infections</td>
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<td>Reduce illness, disability and death related to tobacco use and secondhand smoke exposure</td>
<td>• Washington County Public Health</td>
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*Organizations not listed did not respond to the Focus Area Survey*
What happens next?

In December you will receive the final copy of the Implementation Strategy.

You will be asked to sign a document noting that you have read and understand our implementation strategy.