

“HEALTH CHECKS”*

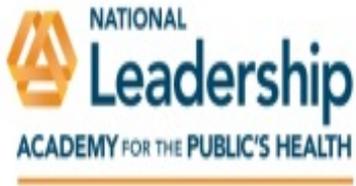
AN INNOVATIVE GRASS ROOTS
COMMUNITY HEALTH
ACTION PLAN TO IMPACT
COMMUNITY-DRIVEN OUTCOMES

* Based on piloted collaborative effort with county government, Nassau Center for Health Initiatives, local hospitals & community agencies

ACKNOWLEDGEMENTS

- NLAPH leaders
- CDC for funding the program
- Eric Baumgartner, MD, MPH
- Nassau County Department of Health
- Nassau Center for Health Initiatives
- Hofstra NSLIJ School of Medicine
- New York Institute of Technology-School of Health Professions-Department of Nursing
- Morrelly Center Applied Center for Homeland Security

Thank you for giving us the opportunity to take part in this program.
Nassau County, New York “Health Checks” Team



NASSAU COUNTY, NEW YORK TEAM

- Maria Torroella Carney, MD, FACP – leader
 - Nassau Center for Health Initiatives (NCHI)
 - Hofstra NSLIJ School of Medicine
- Tavora Buchman, PhD
 - Nassau County Department of Health
- Susan Neville, PhD, RN
 - New York Institute of Technology School of Health Professions, Department of Nursing
- Peter Reinharz, Esq
 - Morrelly Center Applied Science for Homeland Security

Right to Left: Maria Torroella Carney, Peter Reinhartz, Tavora Buchman, Susan Neville

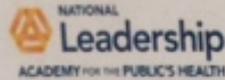


PROJECT ABSTRACT

Demographic indicators over the last decade demonstrate an increased trend in minority, poor, and elderly populations. Therefore, there is a growing public health concern about adequately responding to increased disease burden and emergency preparedness within this vulnerable population. Increasing economic challenges, political barriers and decreasing governmental resources for public health have impacted the health status of communities. “Health Checks”, previously piloted by a collaborative effort with the county government, Nassau Center for Health Initiatives, local hospitals and community agencies, is an innovative action plan strategy developed to target communities with the poorest health outcomes and most vulnerable populations. The “Health Checks” project focuses on developing a capacity building plan to address health disparities and emergency preparedness in communities with the greatest health needs and a willingness and/or ability to participate in an organized effort to promote health and safety. This presentation will focus on the components of “A Big Picture Model” for replication in building community support capacity. “Health Checks” utilizes available health, census and community data to inform and educate project leaders and moves them to form a Local Action Committee (LAC), comprised of local stakeholders for the targeted community. The central goal of Health Checks is to develop a Local Action Committee (LAC) to work with the leadership team to improve health outcomes and emergency preparedness needs. This collaboration will provide community health assessment information which will identify health priorities and support organizational and resources structure to achieve community-driven outcomes. An important outcome of this assessment is to promote advocacy for improved and sustainable community programs and services amongst the local partners and stakeholders to improve health and emergency preparedness. This project has been developed as part of a CDC funded National Leadership Academy for Public Health training program.

Submitted: NSLIJ Annual Nursing Research/Evidence Based Practice Conference May 2013, Sigma Theta Tau International Honor Society for Nursing Biennial Convention

Big Picture

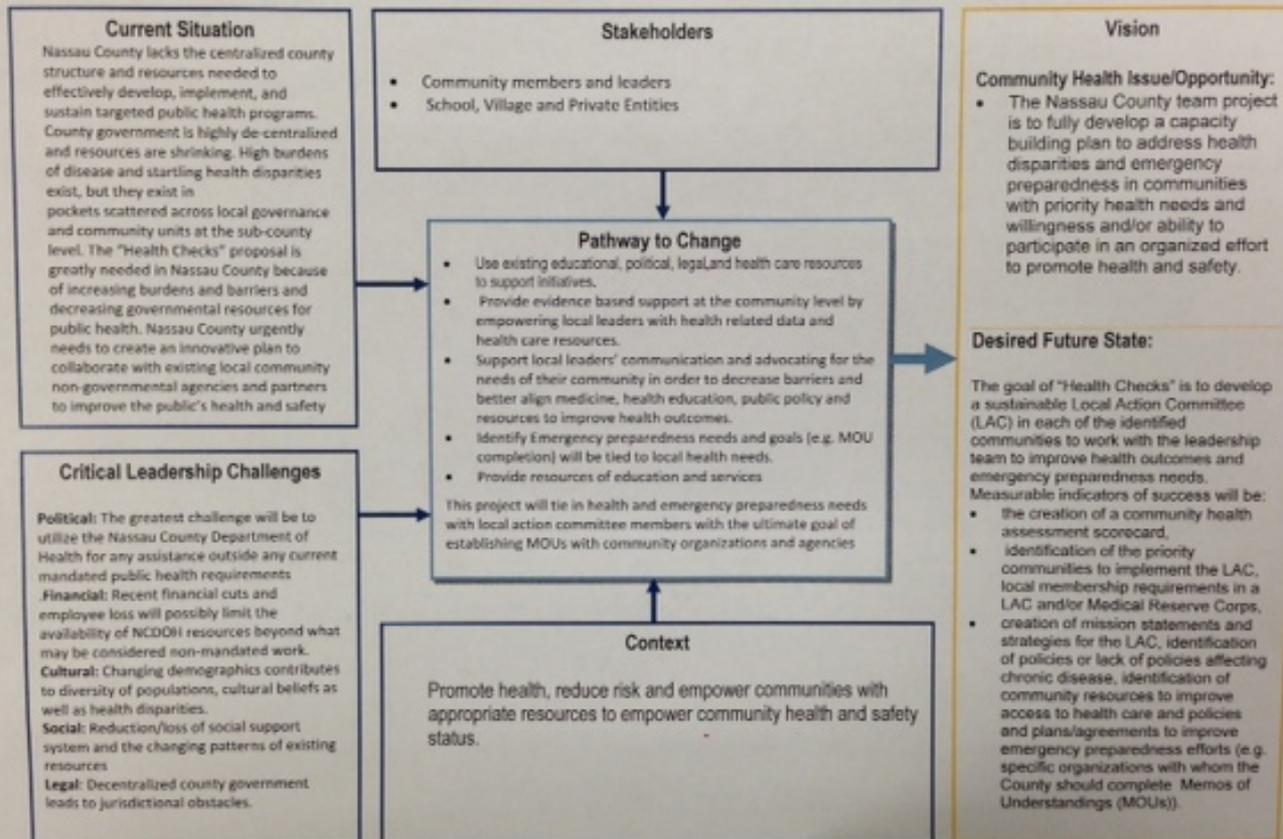


Team Name: "Health Checks"

Maria Torroella Carney, MD -Team Leader

Susan Neville, PhD, RN, Tavora Buchman, PhD , PeterReinharz, JD

THE BIG PICTURE



VISION:

The Community Health Issue and Opportunity

- The Nassau County team project is to fully develop a capacity building plan to address health disparities and emergency preparedness in communities with priority health needs and willingness and/or ability to participate in an organized effort to promote health and safety.

NLAPH TEAM GOALS

1. Clarify the project in order to be replicated in other communities and to be sustainable.
2. Submit a grant application to fund administrative support for project.
3. Develop a strategic plan for NCHI – a public health institute for region, to help sustainability for the project.
4. Submit a project abstract for conference presentation & develop a manuscript – academic goal.

PROJECT NEED

- The Need:
 - Increased disease burden among select communities including aged, immigrant, lower SES
 - Increased economic challenges
 - Increased political barriers
 - Decreased resources within the health community to achieve change

CRITICAL CHALLENGES

- **Political:** Nassau County includes three towns, two cities, 64 incorporated villages and 56 independent school districts. Multiple municipalities require multiple customized approaches rather than a “one-size, fits-all” strategy.
- **Financial:** Economic constraints limit resources from both public and private entities, requiring alternative funding streams.
- **Cultural:** Changing demographics contributes to diversity of populations, cultural beliefs and health disparities.
- **Social:** Reduction of family social support system leads to changing patterns of existing resources.
- **Legal:** Decentralized county government leads to jurisdictional obstacles.

PATHWAY TO CHANGE

- Use existing educational, political, legal and health care resources to support initiatives.
- Provide evidence based support at the community level by empowering local leaders with health related data and health care resources.
- Support local leaders' communication and advocating for the needs of their community in order to decrease barriers and better align medicine/health care delivery, health education, public policy and resources to improve health outcomes.
- Identify emergency preparedness needs and goals (e.g. MOU completion) will be tied to local health needs.
- Provide resources for education and services.

THE PROJECT

- Build community capacity to address health disparity and bolster emergency preparedness.
- Create Local Action Committee (LAC) of community stakeholders to choose the health issue(s) to be addressed in the community.
- Build partnership between community leaders, health leaders and health providers.

THE PROCESS: NLAPH TEAM

1. Identified need to build capacity among burdened communities
 - Nassau County Dept of Health layoffs
 - Hospital budgets shrinking
 - Non for profits challenged
2. Reflected on methods to identify communities with need
3. Created and utilized rubric of health/demographic indices to determine community
 - Several possible communities identified
 - One community selected for project (Glen Cove, New York)
4. Sought valuable counsel and advice from mentor, Dr. Eric Baumgartner
5. Further defined project parameters and challenges for steps following community selection and moving towards LAC formation
6. Created list of stakeholders in Glen Cove, New York for possible LAC members
7. Submitted grant application for project funding
8. Collaborated with NCHI to seek additional funding
9. Submitted project abstract for conference presentation and journal publication

RESULTS

- ✓ Project was clarified
 - Challenges faced
 - Differing visions and ideas at times
 - Barriers addressed
 - Consensus achieved
 - “BIG PICTURE” Process Template Developed
- ✓ Grant application
- ✓ Nassau Center for Health Initiatives (NCHI) Strategic Plan addressed
 - Concept paper drafted
 - NCHI Stakeholder list initiated.
- ✓ Abstract submitted

HIGHLIGHTS

- The Big Picture Process Map Template
- The Inter-professional bond that developed among team members
- Collaboration with representatives from multiple regions with mutual goals
- Dr. Eric Baumgartner's first visit
- Dr. Eric Baumgartner's second visit – well orchestrated opportunity to publicly thank him, NLAPH and CDC through NYIT/NYCOM/SHP Convocation Award
- Phone Calls with Dr. Eric Baumgartner and team
- APHA meeting in San Francisco
 - Meeting with Public Health Institute leaders

OBSERVATIONS

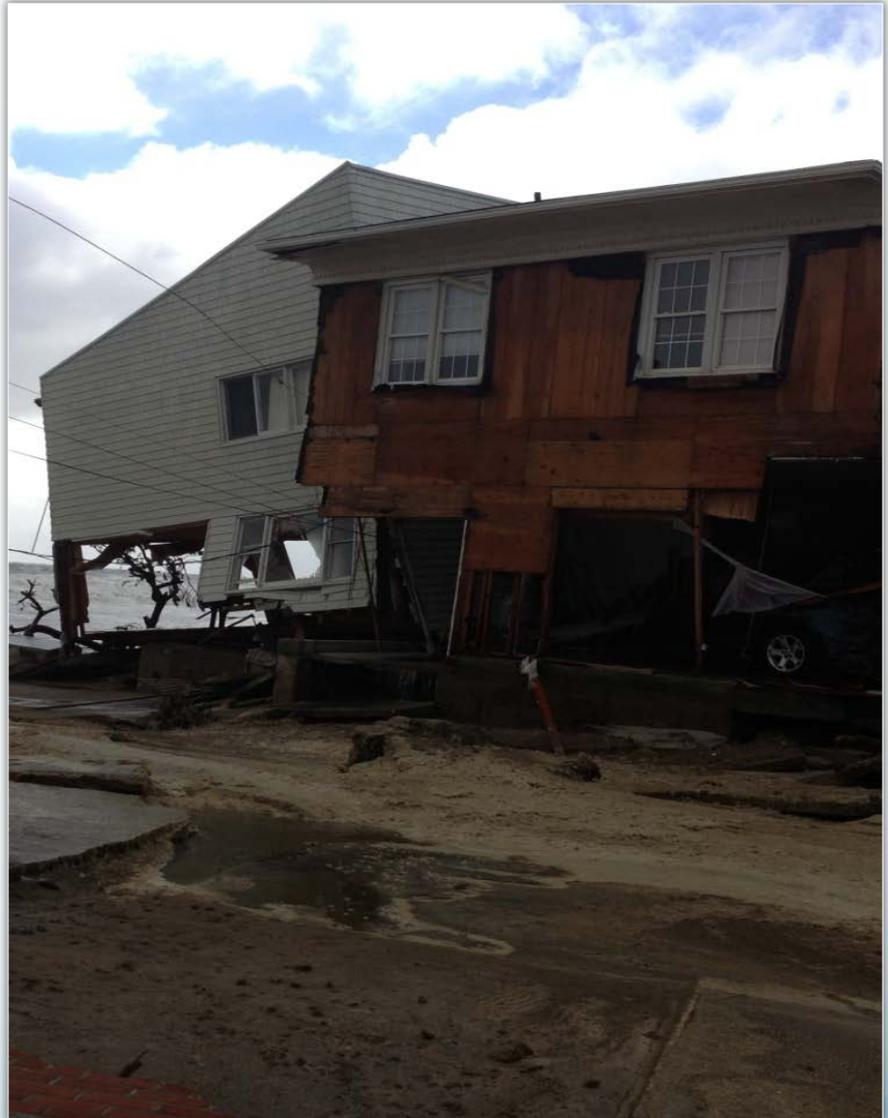
- There is more awareness of building synergy.
- There has been clear shared decision-making.
- There has been clear shared work.
- There is commitment to the project.
- There is interest to continue to work together.
- The team works more easily by hearing out all opinions and building upon each others thoughts.
- Patience and trust with each other increased.
- Clear Communication and Inclusive Collaboration were key factors for staying the course.

Noteworthy: Team goals were identified early. Team worked well together. Team is committed to help the community beyond the scope of this academy.

CHALLENGE

Hurricane Sandy (October 30, 2012 –Present)

Greatly impacted the Team's ability to work in last 2 months of the year due to team members' commitments in health and emergency preparedness in the directly affected area.



Personal Reflections

- Maria Torroella Carney, MD, FACP

“Leadership requires taking a stand, having a vision and communicating the direction for others to follow. Together, the Nassau County Team did this with the project and with the program.”

“Time, commitment, hard work and patience are needed to be successful, but good food and a few laughs can help make the time, commitment, and hard work worth it and makes one have more patience! I enjoyed the time we spent as a team.”

Personal Reflections

- Tavora Buchman, PhD

“Because each of the team members was invested in the project, this unique collaborative approach is sustainable and I have high hopes that the project will eventually be realized through funding in the future.”

“The Health Department fully supported this endeavor as a stakeholder in the broader community and personally supported my commitment to the process and to the time. For that dedication, I am grateful.”

Personal Reflections

- Professor Susan Neville, PhD, RN:

“The importance of developing and sustaining Academic-Service Partnerships is a pivotal strategy in facilitating mutual goals and sharing resources that promote population health.”

“Interdisciplinary teamwork and excellent communication strategies promote a shared vision and progression toward project goals.”

Personal Reflections

- From Peter Reinharz, Esq:

“Leadership will require bringing together various different interest groups. The challenges cross medical, cultural, and jurisdictional boundaries. I look forward to helping bring communities and medical professionals together to serve the forgotten people of Nassau County.”

FUTURE DIRECTIONS

Now that a cohesive team exists, we need to strive for successful next steps addressing national health interests

- Additional grant submissions to support Health Checks project
- Additional Academic contribution
 - Disseminate “THE BIG PICTURE’ Process Template for replication
- Additional NCHI growth
 - Health Checks needs NCHI for sustainability
 - Update Concept paper
 - Philanthropic versus grant support for project with NCHI
- Enhanced community partnerships for health
 - CDC
 - NLAPH
 - NYSDOH
 - Glen Cove and other identified communities
 - NCDOH led opportunities
 - NYIT/Department of Nursing led opportunities
 - Morrelly Center led opportunities
 - Hofstra - NSLIJ/Department of Medicine led opportunities

FOR CONSIDERATION

- NLAPH Phase II – Practical Applications of Leadership Growth
 - Through CDC partnership, offer 2-3 of each year's teams support to take projects into action
 - Proposal for NLAPH Phase II, See Appendix A
 - Teams successes help public's health and the NLAPH program
- Members of the "Health Checks" Nassau Team welcome assisting in anyway for the success of next year, examples:
 - Interview with NLAPH staff
 - Coaching, if needed
 - Speak to future groups

Collaborators



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