# Rensselaer County Community Health Improvement Plan 2019-2021



# **Rensselaer County Department of Health**

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# **Rensselaer County Community Health Improvement Plan Introduction**

**Mission Statement**: To enhance the health and well-being of Rensselaer County residents by providing integrated health programs through the formation of partnerships and unified goals among organizations in the community. We will collaboratively build awareness through traditional and nontraditional promotion of wellness.

#### Vision

Rensselaer County, a healthy place to live.

**Priorities:** Prevent Chronic Disease (focus on obesity and asthma); Promote Well-Being and Prevent Mental and Substance Use Disorders (focus on suicide)

**Health Disparities:** Chronic Disease Prevention: The Troy/Lansingburgh area has the highest rate of poverty and the largest percentage of minority populations in Rensselaer County. The asthma emergency department and hospitalization rates in this neighborhood exceed the rates in other local communities.

# **Local Health Department (LHD):**

Rensselaer County Department of Health Rensselaer County Department of Health

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# **Hospital Partners:**

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# **Coalition Completing Assessment and Plan for the Counties/hospitals:**

Healthy Capital District Initiative Kevin Jobin-Davis, M.S., Ph.D. Executive Director

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# A. Executive Summary

The New York State Department of Health (NYSDOH) has required that each county complete a health assessment and develop a subsequent community health improvement plan (CHIP). The 2019 Capital Region Community Health Needs Assessment (CHNA) was created by The Healthy Capital District Initiative (HCDI) in collaboration with local health departments, hospitals, community members and various local organizations. The CHNA highlighted the health needs of each county in the Capital District by presenting data from a number of sources.

#### **I. Prevention Agenda Priorities**

HCDI is leading the Albany-Rensselaer Public Health Priority Workgroup, composed of representatives from Albany and Rensselaer counties' Departments of Health, St. Peter's Health Partners, and Albany Medical Center. The Workgroup selected the following priority areas from the 2019-2024

New York State Prevention Agenda to address in the 2019-2021 CHIP:

#### A. Prevent Chronic Disease: Asthma/ Tobacco Prevention

- 1) By December 31, 2021, decrease the asthma emergency department visit rate per 10,000 for all age groups for Troy/Lansingburgh by 2% (from 109.8/10,000 in 2012-2016 to 107.6/10,000 by 2021)
- 2) By December 31, 2021, decrease the asthma hospitalization rate per 10,000 for all age groups for Troy/Lansingburgh by 2% (from 22.8/10,000 in 2012-2016 to 22.3/10,000 by 2021).
- 3) By December 31, 2021, decrease the prevalence of vaping product use by high school students by 2% (from 20.6% in 2016 to 18.6% by 2021.)
- 4) By December 31, 2021, decrease the prevalence of vaping product use by young adults age 18-24 years by 2% (from 9.1% in 2016 to 7.1% by 2021).
- 5) By December 31, 2021, decrease the prevalence of cigarette smoking among adults ages 18 years and older by 2% (from 18.3% in 2016 to 16.3% by 2021).
- B. Prevent Chronic Disease: Obesity / Diabetes1) By December 31, 2021, decrease childhood obesity rate by 2% (from 16.4% in 2016-2018 to 14.4% among public school students by 2021).

- 2) By December 31, 2021, decrease the percentage of adults ages 18 years and older with obesity by 2% (from 30.4% in 2016 to 28.4% by 2021).
- 3) By December 31, 2021, increase the number of worksites with breastfeeding friendly policies among the top 20 businesses in the county by 20%
- 4) By December 31, 2021, increase the number of primary care practices that are supportive of breastfeeding by 3 offices.
- C. Promote Well-Being and Prevent Mental and Substance Use Disorders
  - 1) By December 31, 2021, reduce the age-adjusted suicide mortality rate by 10% (from 12.5/100,000 in 2014-2016 to 11.25/100,000 by 2021).
  - 2) By December 31, 2021, reduce overdose deaths involving any opioid by 2% (from 8.4/100,000 in 2016 to 8.23/100,000 by 2021).

The *CHNA* revealed that asthma continues to disproportionately affect Black residents in the Troy/Lansingburgh neighborhood. In an attempt to reduce the disparity, we will focus our asthma-related interventions in this neighborhood.

# **II. Data Review for Priority Determination**

The Rensselaer County 2019-2021 Community Health Improvement Plan is based on the collaborative 2019 Community Health Needs Assessment developed by the Healthy Capital District Initiative in collaboration with local health departments, hospitals, community based organizations, businesses, consumers, schools, academics, and content area experts. Health indicators selected for the 2019 Community Health Needs Assessment were based on a review of available public health data including hospitalizations, emergency room visits, the Behavioral Risk Factor Surveillance System, Prevention Quality Indicators, and other sources. Siena Research Institute conducted a Community Health Survey in December 2018. Rensselaer and Albany counties conducted Community Health Prioritization Meetings in February and March 2019. Data and related discussion confirmed a focus on existing health priorities.

#### III. Partnerships and Community Involvement

The Healthy Capital District Initiative coordinated the collaboration of the Rensselaer County

Department of Health, Albany County Department of Health, St. Peter's Health Partners, Albany Medical

Center, and various community partners to develop the 2019 Capital Region Community Health Needs

Assessment and subsequent 2019-2021 Rensselaer County Community Health Improvement Plan. The

hospitals involved will implement interventions both in the health system and in the community, while

the local health departments will focus on population health in their communities.

The Albany-Rensselaer Obesity / Diabetes Task Force continues meeting to address and monitor the CHIP interventions. In the fall of 2019, HCDI coordinated the reestablishment of the Asthma Coalition of the Capital Region, which will allow a more concentrated effort on the Asthma/Tobacco focus area for the upcoming CHIP cycle. In response to the growing mental health concerns of the County, the Rensselaer County Department of Mental Health has increased participation in its Suicide Prevention Task Force. In 2012, a local health-focused collaborative was formed, the Rensselaer County Wellness Coalition (RCWC). As of 2019, the RCWC has 60 participating organizations. To increase health community involvement in the CHIP, members of the RCWC have been encouraged to join HCDI's focus groups and the Rensselaer County Suicide Prevention Task Force. At each RCWC meeting, CHIP progress and other updates are provided by the subgroups to the attendees.

Engaging the community in the health needs assessment process was a priority of HCDI and its stakeholders. Broad community engagement began with participation in the community health survey. The survey offered multiple choice questions to learn about residents' health needs and priorities, health behaviors, barriers to care, and social determinants of health. Demographic information collected by the survey allowed review of information by age, gender, race/ethnicity and income.

Survey results regarding the public's experience with opioid abuse and opinions on the

seriousness of public health issues were incorporated into the examination of health needs by the members of the Albany-Rensselaer Prevention Agenda Prioritization Work Group. The Work Group included community voices through representatives from community based organizations that serve low-income residents, the homeless, and other vulnerable populations; federally qualified health centers; advocacy groups; employers; public health departments; providers; and health insurers. Participants were encouraged to share data of their own and to advocate for the needs of their constituents. HCDI and its stakeholders strategically invited partners with unique access to medically underserved populations.

# IV. Planned Interventions, Strategies and Activities

The strategies, interventions, and process measures to be implemented are detailed in the Rensselaer County 2019-2021 Community Health Improvement Plan. Most interventions selected for our CHIP were included as evidence-based practices in the 2019-2024 New York State Prevention Agenda.

# V. Evaluation

The local focus area subgroups will serve as the vehicles for monitoring progress and evaluating impact. The specific measures chosen are included in the 2019-2021 Rensselaer County Community Health Improvement Plan.

# **B. Community Health Assessment**

# **Description of the Community**

Rensselaer County is located in the Hudson-Mohawk Heritage area of Upstate New York's Capital Region. The county is bordered by Albany, Columbia, Greene, Saratoga and Washington counties, and the states of Massachusetts and Vermont.

Rensselaer County is home to "architectural skylines and wideopen spaces"<sup>i</sup>, with "world-class educational institutions and brimming



apple orchards." <sup>i</sup>There are fourteen towns, six villages, and two cities within the 665 square miles of Rensselaer County. <sup>i</sup> The cities of Rensselaer and Troy, which are comprised of fourteen square miles, house approximately forty percent of the county's population. "The County seat is Troy, known as the home of Uncle Sam and our other city, Rensselaer, sits on the bank of the historic Hudson River, directly across from the Empire State's Capital, Albany." <sup>i</sup>

Rensselaer County is governed by a County Executive and a 19-member County Legislature. The current County Executive is Steven F. McLaughlin and the Chair of the Legislature is Michael E. Stammel.

The Residents of Rensselaer County

SELECT DEMOGRAPHICS	RENSSELAER COUNTY
Population	159,800
Male	78,890 (49.3%)
Female	81,069 (50.7%)
Median Age	39.9 years
Non-white population	20,945 (13.1%)
Median household income	\$ 63, 166
Employed	80,468 (61.3%)
Unemployed	4, 960 (3.8%)
Persons Living Below Poverty Level	19,064 (12.4%)
Persons age 25 years + with less than	9,162 (8.4%)
high school education	
Persons with a Disability	21,468 (13.6%)

(Source: Bureau of Census, American Community Survey, 2012-2016, 2013-2017)

#### **Sociodemographic Indicators**

- With a population of 159,959, Rensselaer County was the 3rd most rural county in the Capital Region (245.3 population /square mile);
- Rensselaer County had the 2nd lowest median age (39.8 years);
- 16.6 % of the Rensselaer County population was 0-14 years of age, while 15.1% was 65+ years of age;
- The North East neighborhood had the largest 0-14 year old population (21.2%);
- Rensselaer County had the Capital Region's 3rd largest percentage of non-White population (13.1%), but the 2nd smallest Hispanic population (4.5%);
- Troy/Lansingburgh neighborhood had the largest non-White population (22.0%)
- Troy/ Lansingburgh neighborhood had the greatest percentage of Black non-Hispanic population (12.0%)
- Troy/Lansingburgh neighborhood had the largest Hispanic population (7.3%);
- Rensselaer County had the 3rd lowest Median Household Income in the Capital Region (\$59,959) and the 3rd smallest percentage of population below poverty (12.4%);
- Troy/Lansingburgh had the highest neighborhood poverty rate (19.9%);
- Rensselaer County had the 3rd smallest percentage of population 25+years of age with less than a high school education (8.4%);
- Troy/Lansingburgh neighborhood had the largest population 25+ years of age with less than a high school education (11.2%).

# 2. Health Status of the Population and Distribution of Health Issues

Every year, the University of Wisconsin publishes *The County Health Rankings and Roadmaps*.

These rankings demonstrate how geography impacts the health of a community. In 2019, Rensselaer

County ranked 30 th for New York State County Health Outcomes (out of 62 counties). Health Outcomes indicate how healthy the County is, specifically in regards to mental and physical health. Rensselaer

County was ranked 17th for Health Factors in New York State in the *2019 County Health Rankings*.

Health Factors influence quality and length of life. The various components that determined Rensselaer

County's 2019 Health Outcomes and Health Factors rankings are detailed below.

#### **Access to Care**

Previously, Rensselaer County had two hospitals, Samaritan Hospital and St. Mary's Hospital, both entities of St. Peter's Health Partners. As of January 1, 2019, Samaritan Hospital and St. Mary's Hospital merged to become one nonprofit hospital, with two campuses. St. Mary's is now considered a satellite of Samaritan Hospital. Within the county, there is one Federally Qualified Health Center (FQHC), the Whitney M. Young Jr. Health Center, Inc., located in Lansingburgh.

Since 1994, Rensselaer County has been considered a Medically Underserved Area (MUA) by the Health Resources & Services Administration (HRSA). MUA's have "a shortage of primary care health services for residents." The most recently published ratio of primary care physicians to residents within Rensselaer County is 1 to 1,860 residents, and the ratio for other primary care providers is 1 to 944 residents, iii indicating a deficit in available primary care providers.

Since 2004, The City of Troy has been designated as a Low- Income Medically Underserved Population by HRSA. MUPs have a shortage of primary care health services for a specific population subset within an established geographic area. Almost 1 in 5 Troy/Lansingburgh residents lives in poverty, waking the neighborhood a more medically vulnerable population. As demonstrated below, the Troy/Lansingburgh neighborhood has numerous disease rates higher than the State and County average, including diabetes, CLRD, mental disease, and asthma ED visits.

As of 2016, 94.3% of Rensselaer County adults 18-64 had insurance, leaving 5,825 residents uninsured, in and 88.4% of residents had a regular healthcare provider. Although 94.3% of adults had insurance, in 2016, 10.7% of adults did not receive regular care due to cost.

#### **Distribution of Health Issues**

#### A. Asthma/ Tobacco Use

- Rensselaer's adult current asthma prevalence (11.7%), and asthma emergency department visit rate (47.3/10,000), were higher than NYS excl. NYC (10.4%, and 41.4);
- The County's asthma hospitalization rate decreased 33%, while the ED visit rate was static between 2009 and 2014;
- Troy/Lansingburgh had 2.5 times the asthma ED visit rate and 1.8 times the asthma hospitalization rate as NYS excl. NYC;
- Rensselaer's adult smoking rate of 18.3% was higher than NYS excl. NYC (17.0%), but decreased 23% from its rate in 2013-14 (23.8%);
- The County's lung cancer incidence (85.9/100,000), lung cancer mortality (51.2/100,000), and CLRD mortality (54.3/100,000) rates were higher than NYS excl. NYC (67.2, 43.3, and 40.1);
- Troy/Lansingburgh had 2.4 times the CLRD ED visit rate and 1.9 times the CLRD hospitalization rate compared to NYS excl. NYC

The disparity among asthma prevalence can be demonstrated by reviewing Emergency Department utilization.

**Asthma ED Visits by Neighborhood** 

Neighborhood	ED Visit Rate
Central	21.1
East	22.1
East Greenbush	22.0
North East	11.5
North West	32.2
Rensselaer	39.0
South West	28.1
Troy/Lansingburgh 109.8	
West Sand	19.3
Lake/Wynantskill	19.5
Rensselaer County	36.5

# B. Diabetes/ Obesity

- Rensselaer County's adult obesity rate of 31.5% (36,000 adults), and child and adolescent obesity rate of 18.7% (4,500 children) were both higher than NYS excl. NYC (27.5%, 17.3%);
- Rensselaer's diabetes mortality rate of 19.5/100,000 were higher than NYS excl. NYC (15.3);
- The County's diabetes short-term complication hospitalization rate (6.0/10,000) was higher than NYS excl. NYC rate (4.1) and increased 26% from 2008-10 to 2012-14;
- Troy/Lansingburgh neighborhood had 2.3 times the diabetes ED rates, while North West had 1.6 times the diabetes hospitalization rates compared to NYS excl. NYC

# C. Heart Health

- Rensselaer County had a slightly higher rate of adults with hypertension (33.4%) compared to NYS excl. NYC (33.0%);
- Rensselaer's heart attack mortality rate (17.5/100,000) and congestive heart failure mortality rate (20.9/100,000) was higher than NYS excl. NYC (14.8, 17.4)

# D. Cancer

Rensselaer's colorectal screening rate of 76.8% was higher than NYS excl. NYC (69.6%), yet the
county's colorectal cancer incidence rate (41.4/100,000) and mortality rate (16.8/100,000) were
both higher than NYS excl. NYC (38.9 and 12.9);

• Rensselaer's mammography screening rates were lower than Rest of State for women 50-74years of age (77.4% vs 79.2%), however only the late stage female breast cancer incidence rate was higher than NYS excl. NYC (45.5/100,000 vs 43.0).

#### E. Healthy and Safe Environment

- Rensselaer's incidence rate of elevated blood lead levels (10+ug/dl) in children under 6 years of age of 12.2/1,000 was twice as high as the Rest of State (6.0);
- The County's lead screening rates for children 9-17 months (71.0%) and 2 screens by 36 months (57.5%) were similar to NYS excl. NYC (71.7% and 55.9%);
- Rensselaer's elderly (65+ years) fall hospitalization rate of 228.4/10,000 was higher than NYS excl. NYC (189.9) but decreased 7% from 2009 to 2014;
- The County's pediatric (1-4 years) fall emergency department visit rate of 441.3/10,000 was higher than NYS excl. NYC (408.5);
- East Greenbush neighborhood had 2 times the elderly fall ED visit rate, while Troy/Lansingburgh had 1.6 times the pediatric fall ED visit rate compared to NYS excl. NYC.

# F. Healthy Women, Infants, and Children

- Rensselaer' teen (15-17 years) pregnancy rate of 11.4/1,000 was higher than NYS excl. NYC (9.9), but has decreased 54% from 2009 to 2016;
- Troy/Lansingburgh neighborhood's teen pregnancy (15-19 years) was 1.5 times higher than NYS excl. NYC;
- Rensselaer's rate of premature births (< 37 weeks gest.) of 9.7% was higher than NYS excl. NYC (9.1%);
- The County's rate of low birthweight (< 2.5 kg.) of 9.5% was higher than NYS excl. NYC (7.7%);
- Rensselaer County's infant mortality rate of 6.9/1,000 live births was higher than NYS excl. NYC (5.0);
- East neighborhood had 1.9 times the rate of premature as well as low birthweight births compared to NYS excl. NYC.

#### G. Infectious Disease

- Rensselaer County's gonorrhea rate in women aged 15-44 years of 260.8/100,000 was higher than NYS excl. NYC (197.1);
- Rensselaer's chlamydia case rate for women 15-44 years of 1433.4/100,000 was higher than NYS excl. NYC (1220.3) with a 33% increase from 2009 to 2013;
- The County's gonorrhea rate increased 175% and the chlamydia rate 25% from 2013 to 2017.
- Rensselaer's Lyme disease case rate of 395.5/100,000 was higher than NYS excl. NYC (77.8), and the 3rd highest rate of all NYS counties.

#### H. Mental Health and Substance Abuse

- About 12.5% of adult Rensselaer residents indicated that they had 14+ poor mental health days
  in the past month, and higher than NYS excl. NYC (11.2%), but was an 26% decrease from 201314 (17.0%);
- Rensselaer's suicide mortality rate of 12.5/100,000 was higher than NYS excl. NYC (9.6);
- East neighborhood had 2.2 times the suicide mortality rate than NYS excl. NYC;
- Rensselaer County had a higher mental disease and disorder ED visit (168.8/10,000) than NYS excl. NYC (147.8), and a higher hospitalization rate (75.4 vs 64.1);
- Troy/Lansingburgh neighborhood had 2 times the mental disease and disorder ED visit rates, and 2 times the mental disease and disorder hospitalization rate than NYS excl. NYC;

- Rensselaer residents had a higher rate of opioid burden (411.7/100,000) and opioid overdose hospitalizations (166.8/100,000) than NYS excl. NYC (300.3, 124.4);
- Rensselaer County's opioid overdose ED visit rate increased 40%, and mortality rate increased 62% from 2013 to 2017;
- Central neighborhood had 1.5 times the opiate-related ED visit rate than NYS excl. NYC;
- Rensselaer's adult binge drinking rate of 20.2% was higher than NYS excl. NYC (19.1%);
- The County's cirrhosis mortality rate (8.7/100,000) was higher than NYS excl. NYC (8.1).

#### **Socioeconomic Risk Factors**

According to *The County Health Rankings and Roadmaps*, socioeconomic factors including employment, housing, and income impact "40% of how well and how long we live." Socioeconomic factors for residents of Rensselaer County including the employment rate, median income, and percentage of adults with less than a high school education are included in the above table in section B. The Healthy Capital District Initiative's *2019 Capital Region Neighborhood Analysis* demonstrated a strong correlation between Years of Potential Life Loss (YPLL), Area Deprivation Index (ADI) and SocioNeeds Index. The 2019 SocioNeeds Index, created by *Conduent Healthy Communities Institute*, is a measure of socioeconomic need that is correlated with poor health outcomes. Index values vary between 0 (low need) to 100 (high need). Lansingburgh's 2019 Socioneeds Index is 66.2, and Troy's Index is 53.2, indicating these are high-need areas. HRSA developed the Area Deprivation Index (ADI) to measure the level of deprivation in a region, with a higher score signifying a higher level of deprivation. Troy/Lansingburgh's ADI is 102.7 and the East Neighborhood's ADI was 93.8.

# Policy Environment (smoke free parks, zoning, menu labeling)

Within Rensselaer County, 4 municipalities have enacted Ordinances or Resolutions prohibiting the use of cigarettes in their public parks and playgrounds. Some of these municipalities have also prohibited smoking at additional outdoor properties. The 1,110 apartments managed by Troy Housing Authority properties are smoke free. The Hoosick Housing Authority and Rensselaer Housing Authority

are also smoke free properties. As of October 2018, 30 additional properties within Rensselaer County have implemented smoking policies in at least one of their buildings. vi

Efforts are being made to expand access to walkable communities within Rensselaer County.

The City of Troy has a Complete Streets ordinance, and Capital Roots has implemented a Safe Route to School in Lansingburgh. In 2019, the Town of East Greenbush received \$1 million from the NYS

Department of Transportation for pedestrian improvements, and an additional \$680,000 in grant funds to improve the sidewalks along Routes 9 and 20.vii

The Environmental Health Division of the Rensselaer County Department of Health actively administers Environmental Health Programs regulated by NYSDOH. There are several Public Health Sanitarians and Technicians who inspect food service sites, water sources, and indoor air quality, with additional programs that ensure a safe environment for County residents. The County's Lead Poisoning Prevention program offers free lead risk assessments and education for residents who may have been exposed to lead hazards in their homes. The County's new Lead Hazard Control grant provides material support to landlords of residences containing lead. Windowsills and other household features can be replaced through this grant funding, which will decrease tenants' exposure to lead. To reduce resident exposure to Radon, a gas known to cause lung cancer, the Healthy Homes program provides free Radon tests and referrals to resources that would reduce Radon levels in the homes. At this time, Rensselaer County is home to 20 major chain restaurants that follow federal menu labeling guidelines. There is no local policy in place requiring smaller food establishments to include nutrition information on their menus.

# 3. Summary of Asserts and Resources

Assets were compiled by HCDI for the 2019 Capital District Community Health Needs Assessment.

	Obesity Prevention Care and Management
Organization	Rensselaer County Assets
American Diabetes Association - Living With Type 2 Program	Diabetes Self-Management Training and Education
Capital District YMCA	Blood Pressure Self-management
	National Diabetes Prevention Program
Community Care Physicians	Diabetes Self-Management Training and Education
	Medical Nutrition Therapy
Cornell Cooperative Extension	Dining with Diabetes - Weight Management Classes
JDRF's Sugar Free Gang	Diabetes Support Groups and Education
Rensselaer County Department of Health	National Diabetes Prevention Program
St. Peter's Health Partners (Diabetes and Endocrine Care)	Diabetes Self-Management Training and Education
(Diabetes and Endocrine Care)	Medical Nutrition Therapy
	Diabetes Support Groups
	National Diabetes Prevention Program
TOPS Grocery Stores	Weight Management through Nutritional Education
Weight Watchers Studio	Diabetes Self-Management Training and Education
Whitney M. Young Jr. Health Services	Diabetes Self-Management Training and Education
Jei vices	Medical Nutrition Therapy

Physical Activity	
Organization	Rensselaer County Assets
Fitness	Collar City Athletics
	Planet Fitness
	Silver Sneakers
	CDPHP Fitness Connect
	Capital District YMCA
	Vent Fitness
Parks and Recreation	Rensselaer County: http://www.rensco.com/wp-content/uploads/2017/06/Public_Health_ Outdoor-Activity-Areas-2.pdf

Healthy Eating and Food Security	
Organization	Rensselaer County Assets
Regional Food Bank of Northeastern New York	Backpack Program
Northeastern New York	Our Farm Program
	Just Say Yes to Fruits and Vegetables
	Mass Distribution/Mobile Pantry
	School Pantry Program
	Summer Food Service Program
	SNAP Registration Assistance
Grocery Stores	ALDI's
	Hannaford
	Price Chopper
	Save A Lot
	ShopRite of Rensselaer
	Walmart
Brightside Up (Capital District Child Care	Child and Adult Care Food Program (CACFP)
Coordinating Council)	Farm to Preschool – nutrition education, local produce
	Eat Well Play Hard Program
	Child Care Health Consultant Services
Farmers Markets –	*Troy Waterfront Farmers Market - May 4-October 26, Saturday 9am-2pm
*Accepts SNAP	Poestenkill Farmers Market and Craft Fair
	*Capital Roots Produce Market - Year- round, Mon-Fri 9am-4:30pm
	*Capital Roots Produce Project Farm Stand - May 7-October 29, Tuesday 4pm-6pm
	East Greenbush Farmers Market - June 12-September 25, Wednesday 4pm-7pm

Commission on Economic	Baby Café
Opportunity	Special Supplemental Nutrition Program for Women, Infants and Children
	Food Pantry
Cornell Cooperative	Nutrition Education Program
Extension	Agriculture and Horticulture program – education
	Central NY Diary and Livestock Team
	4-H Vegetable Marketing Program – youth grow their own vegetables
Rensselaer County Department of Aging	Nutrition Program
Department of Aging	Home delivered meals
	Congregate meals
Rensselaer County Department of Health	Nutritional Education
St. Peter's Health Partners	Breastfeeding Promotion, Protection, and Support
	Creating Healthy Schools and Communities
The Food Pantries for the Capital District	Emergency Food Assistance – Food Pantries
Legal Aid Society of NY	SNAP Registration Assistance
Trinity Alliance of the	Emergency Food Assistance – Food Pantries
Capital Region	Community garden
YWCA - Troy	Community meals
	Food pantry
Unity House of Troy	Community Meals
	Emergency Assistance
Whitney M. Young Health Center	Special Supplemental Nutrition Program for Women, Infants and Children

Tobacco Use and Asthma Services	
Organization	Rensselaer County Assets
Capital District Tobacco- Free Coalition	Support tobacco-free living by making their property tobacco-free.
	Telephone, email and in-person technical assistance;
	Presentations and information sessions;
	Supportive materials and resources for both staff and consumers;
	Sample policies, employee/consumer outreach materials, and FAQs;
	Timeline development and implementation;
	No-cost tobacco-free signage.
Community Foundation for the Greater Capital Region	Green Healthy Homes Initiative Greater Capital Region – integrates health, safety, and energy efficient interventions in low- to mod- income homes.
Rensselaer County	Healthy Neighborhood Program
Department of Health	Smoking cessation classes
St. Peter's Health Partners  Community Health Programs	Partner with medical & mental health care providers to implement systematic, evidence based tobacco dependence treatments so that every tobacco user is offered tobacco dependence treatment during medical visits. Patients are supported through education counseling and the use of appropriate medications
Health Systems for a Tobacco-Free NY	
St. Peter's Health Partners  The Butt Stops Here	Tobacco cessation program that provides support to community members through an intensive counseling program offered at locations throughout the Capital Region.

St. Peter 's Health Partners	Free program designed to provide patients and families with information to help manage asthma.
EDDY Licensed Home Care Agency Home-Based Asthma Management Program	Skilled Community Health Workers meet with families in the home Eligibility: child or adult diagnosed with asthma; residents of the cities of Albany & Troy; experienced at least one asthma attach, resulting in an emergency department visit, hospital admission or sick visit to a health care provider
St. Peter's Health Partners  Pulmonary & Critical Care Services	Services include a full pulmonary function laboratory which enables us to offer a variety of diagnostic and therapeutic tools that were previously available only at a hospital. This provides the patient with a convenient choice of facilities and allows our physician's faster access to information needed in the care of their patients.  We also offer spirometry, chest X-ray, ECG, oximetry, Endobronchial ultrasound
	(EBUS), and a Sleep Center.
St. Peter's Health Partners Better Breathers Support Group	Free support group for those living with lung disease. The group meets regularly and meeting typically feature an educational presentation on a wide range of topics such as breather techniques, medication, exercise and more.
St. Peter's Health Partners Asthma Educator Program	Program to ensure that the clinicians will be able to provide patients with the most current and comprehensive information concerning asthma. This would include teaching self-management skills, the roll of medications, their delivery devices, and controlling environmental factors

Substance Abuse and Mental Health	
Organization	Rensselaer County Assets
Alcoholics Anonymous	Alcoholism Treatment Program
Addiction Care Center (ACCA) -Prevention and Community Education Services	Addiction Treatment services at Rensselaer County Correctional Facility – assessment , counseling & discharge planning  Proposed to open by end of 2019 – 820 residential congregate care services, 20
	beds for men  Grant from CDPHP Foundation – prevention services for two school districts: "An Apple a Day"
Albany Medical Center- part time Suboxone Clinic in Rensselaer County	Provides outpatient medication-assisted treatment for patients experiencing opioid abuse. Refers for more intensive addiction services if necessary.
American Foundation for Suicide Prevention	Grief Support Groups
Brattleboro Retreat	Inpatient, Outpatient, Residential and day programs for all ages
Capital Counseling	Inpatient and Outpatient home transition counseling services
	Phone-based clinical office support and case management
	Referral Services
Capital District Behavioral Health	Counseling for all ages
0 11 151 1 1 5 1 1 1 1	Family, couple, and individual counseling
Capital District Psychiatric Center	Crisis Center – Intervention
Center	Counseling Clinic
	Child and Adolescent Outpatient Services
Capital District Physicians	Access and Triage: 24 hour telephonic behavioral health assessment, triage and
Health Plan	referral services for CDPHP members. Services including inpatient mental health,
	inpatient detox and substance abuse rehab, ambulatory opioid detox, partial
	hospital and intensive outpatient, outpatient mental health and substance abuse.
	Effective 7/1/2016, administration of NYS Medicaid HARP services.
	Behavioral health and medical case management, providing coordination of care across the continuum of treatment.
	Utilization Management: Application of medical necessity criteria to assure members receive the appropriate levels of treatment.

# Rensselaer County Mental Health

Children & Adolescents Outpatient Clinic

- Children & youth ages 0-21 years old (several school satellite clinics) & a satellite at Community Care Pediatrics – Troy: includes crisis evaluations; assessment, therapy, psychiatric evaluation; medication management; psychological testing
- Care Coordination for Children and Youth with Severe Emotional Disturbance
  - including High Fidelity Wraparound Program serving the highest acuity children and youth
- Adult Outpatient Treatment in City of Rensselaer serving adults with mental illness through crisis evaluation, assessment, therapy, psychiatric evaluation, medication management; & nursing services
- Health Home Care Coordination services for Adults serving the Health Home Plus population including AOT
- Court Consultation evaluations for Rensselaer County Family Court
- Forensic Services satellite clinic at Rensselaer County Correctional Facility

   providing mental health assessment, treatment, psychiatric evaluation,
   medication management & discharge planning; assessments for Vivitrol
- Services to residents of Private Proprietary Homes for Adults (PPHA); and senior outreach services
- MICA (Mental Illness and Chemical Addiction) Outreach and Assessment Services
- Substance Abuse Prevention Services school and community based: includes evidence based curriculums; prevention counseling; community coalition support; linkage to treatment services
- Single Point of Access SPOA (adult housing and children and youth care coordination)
- Certified Recovery Peer Advocate
- VOYA- contracted to Youth Power Inc. to develop support and advocacy group for youth with lived experience of emotional disturbance; addiction/recovery; intellectual or developmental disability;
- Urine Drug Screening for RCDSS
- MH Probation Officer funded to Rensselaer Co Probation Dept.
- CASAC at RCDSS contract provider for RCDSS

Capital District Tobacco-	Comprehensive assistance to BH agencies in Rensselaer County to support
Free Coalition	tobacco-free living by making their property tobacco-free.
	Assistance includes:
	Telephone, email and in-person technical assistance;      Description and information assistance.
	<ul> <li>Presentations and information sessions;</li> <li>Supportive materials and resources for both staff and consumers;</li> </ul>
	<ul> <li>Sample policies, employee/consumer outreach materials, and FAQs;</li> </ul>
	Timeline development and implementation;
	No-cost tobacco-free signage.
Catholic Charities	Harm Reduction Services through drop in and by appointment in the community
"Project Safe Point"	including: Syringe Exchange, Risk Reduction Education, Overdose Training
	w/Naloxone, HIV/HCV Screening and testing Substance Use Treatment Referrals.
	Substance use Treatment Neterrals.
Center for Disability	Counseling
Services	
The Community	Wave Riders – weekly support group for grieving families with children
Hospice	Counseling – Individual or family grief counseling
	Support Groups – for adults  Camp Erin – free weekend overnight campforgrieving children 6-17 yo
	camp zim nee weekena overnight camp of give in gomatein 27 yo
In Our Own Voices	National LGBT POC Health Summit
	Education Support Groups
	TransCare
	Voices of Unity(support group), individual advocacy, testing referrals, connection to care, legal services and other needs related to health and well-being
Karner Psychological Associates	Psycho-educational group therapy
	Specialty groups for mental health education
	Life coaching
	Educational Services
	Counseling
Narcotics Anonymous	Addiction recovery Services

National Alliance on	Family Support Group
Mental Illness in NYS - Capital Region	Family to Family – course for family living with mental illness
Capital Region	Talling to railing Coarse for farmly wing with mental inness
	Homefront – course for families and loved ones with vets with mental illness
	Basics – course for caregivers of children with mental illness
	NAMI Connection Recovery Support Group – peer-led support group for adults living with mental illness
	Peer to Peer – Course by peers to peers on mental illness
	Hearts and Minds – educational program for people living with mental illness
	Faithnet – religious outreach educational training to deal with mental health
Northern Rivers On-	Coordinated Care and Community Solutions
Track New York	Behavioral Health Services – Assertive community treatment, crisis stabilization services, home based crisis intervention, school based behavioral health
	Residential and Foster Care Services
	Education
	SATRI Training and Research
Pearl Counseling Center, Inc.	Individual, couple, group and family counseling services of people impacted by substance abuse
Pinnacle Place	Medication Management Psychiatric services
Behavioral Health	Therapy – Individual, couples, group and family counseling
	Ancillary Services – Tai chi, Yoga
	Anxiety class weekly
	Hypnosis
The Pride Center of	LGBTG+ Crisis Counseling
the Capital Region	Training and educational services on mental health
	Referral Services
	Pride events
Rensselaer County Department of Health	Naloxone training
	22

St. Peter's Health Partners Troy Acute Department	63 inpatient psychiatric beds across three units at Samaritan Hospital with specialty units for dual diagnosis and geriatric psychiatry
	Emergency psychiatric evaluation through a dedicated crisis service at the Samaritan hospital Emergency Room
	Outpatient Clinic serving approximately 2,300 individuals in need of psychiatry, counseling, groups, nursing
	Health Home services across Albany, Schenectady and Rensselaer Counties to provide care coordination across medical, behavioral and social services
	Samaritan PROS located at 1801 Sixth Avenue providing Personalized Recovery Oriented Services for individuals with mental illness
	20 Inpatient Substance Abuse Rehab beds at St. Mary's Hospital
	Ambulatory Detox located at the former St Mary's Hospital
	Consult Liaison Psychiatry services at Samaritan, and Albany Memorial Hospitals.
Whitney Young Health Center	Whitney Young Health Center provides the following services:  • Addictions Care
	<ul> <li>Integrated Primary Health and Behavioral Health Care</li> <li>Mental Health Services</li> </ul>
Joseph House Shelter Inc.	34 supported housing beds funded by Mental Health \$ and HUD monies at the Hill St Inn & Lansing Inn. Albany, Rensselaer, Schenectady, Saratoga, Warren and Washington Counties, the NYS Office of Mental Health (NYS OMH), and the NYS Office for People with Developmental Disabilities (NYS OPWDD), the Capital District Psychiatric Center, and the support of many families and community stakeholders.
Conifer Park Inc.	Inpatient Rehabilitation Program (regional) - Treatment addresses the individual's drug and/or alcohol use and any associated medical, psychological, social, vocational or legal problems.
Rehabilitation Support Services (RSS)	7 supported housing beds funded by Mental Health
YWCA - Troy	7 supported housing beds funded by Mental Health
	The objective of this program is to assist women with mental health issues to maintain permanent housing and to decrease hospitalizations through housing, case management and supports.

Unity House Inc.	114 licensed Mental Health Congregate Care 2 beds (Community Residence & Transitional Apartments)
	Supported Housing opportunities funded by Mental Health monies
	Nursing Services to support individuals in Housing and Support Services funded by Mental Health monies
	PROS – Personal Recovery Oriented Services – with a focus in vocational skills and readiness for adults with Mental Illness. A program capacity of 100.
	Health Home Care Management
Mental Health Empowerment	One-on-One Peer Support
Exchange	Advocacy Services
	Holistic Paths to Wellness
	Peer Specialist Training
	Creative Community Connections
	Volunteer Opportunities
	Peer Support Warmline
Northeast Career Planning	PROS - Personal Recovery Oriented Services serving multiple counties
•	The OASAS program at Northeast Career Planning provides services to individuals with Substance Use Disorders who are actively engaged in recovery.
	Work with 6 treatment providers at 11 different treatment and residential settings in Rensselaer, Schenectady and Albany Counties.
	Promoting recovery through employment and range from employment preparation and skill development to job placement, job saves and job retention.
Northern Rivers Mobile Crisis Team	Serving Children, youth and adults in: Rensselaer, Schenectady, Saratoga, Warren and Washington Counties services provide emotional, psychiatric and behavioral crisis interventions in a range of community settings

Vanderheyden Hall Inc.	Contracted provider of RCDMH - Family Support Services – including Family Peer Advocacy and Youth Peer Advocacy  Engagement, Bridging, and Transition  Self- Advocacy, Self-Efficacy, and Empowerment
	Parent Skill Development  Community Connections and Natural Supports
St. Anne's Institute	Contracted provider of RCDMH for: The SAI/RCDMH Specialized Treatment Program provides services to families with children and adolescents who have engaged in sexually abusive, coercive, and/or sexually inappropriate behavior.  Referrals for families with children and adolescents who are experiencing sexual behavior problems can come from anywhere in Rensselaer County.

# C. Community Health Improvement Plan

#### 1. Priorities

Rensselaer and Albany Counties have chosen to address three priorities for this CHIP cycle; Prevent Chronic Disease, with a focus on obesity and asthma, and Promote Well-Being and Prevent Mental and Substance Use Disorders, with a focus on suicide.

# **Health Disparity**

Asthma was selected as the health disparity that Albany and Rensselaer County will target for this CHIP cycle. Within Rensselaer County, the Troy/Lansingburgh area has the highest rate of poverty and the largest percentage of minority populations in Rensselaer County. The asthma emergency department and hospitalization rates in this neighborhood exceed the rates in other local communities.

#### **Selection of Priorities**

Selection of the top health priorities for the Capital Region was facilitated by a new Public Health Issue Prioritization tool created by HCDI, based on feedback from the 2016-2018 Prioritization Cycle. In the fall of 2018, HCDI staff reviewed approximately 170 Public Health Indicators across the five Prevention Agenda priority areas and incorporated the key indicators into 30 Public Health Issues. Public Health Issues were identified by reviewing the present New York State Department of Health Prevention Agenda Focus Areas, as well as Public Health Issues incorporated in the last Prioritization Process in 2016. The 30 Public Health Issues were ranked for each of the six counties in the Capital Region. The ranking tool utilized a quantitative method, based on previous prioritization efforts (e.g. Hanlon Method), to assist the county selection process from 30 Public Health Issues to a shorter list of health issues for participating partners to examine and make final selections. Each indicator was scored on five dimensions:

- Size (percent or rate) relative to NYS excluding, NYC;
- Impact on quality of life;
- Trends from 2013-2015 or a comparable timeframe;
- Disparity (Index of Disparity using race/ethnicity); and
- Absolute number of individuals affected.

A comprehensive overview of the ranking methodology can be found on the HCDI website (http://hcdiny.org) by selecting "Explore by County" and locating "Public Health Issue Prioritization Methodology Review" in the "County Data and Resources" section.

A Prevention Agenda Work Group, with participation from local health departments of Albany, Columbia, Greene, Rensselaer, Saratoga and Schenectady counties, St. Peter's Health Partners, Ellis Medicine, Albany Medical Center, Saratoga Hospital, and Columbia Memorial Hospital, met in the winter of 2018 to review the Ranking Methodology and provide oversight and guidance in the prioritization process. Using the quantitative rankings provided by the tool, as well as consideration of the availability of quality data, adequacy of current efforts, organizational capacity, upstream vs. downstream factors, and potential for evidence-based interventions, Prevention Agenda Work Group participants selected 12-15 Public Health Issues for more comprehensive review by the local Prevention Agenda Prioritization Work Groups.

The local Prevention Agenda Prioritization Work Groups were formed to review data analyses prepared by HCDI for the Public Health Issues identified by the Prevention Agenda Work Group and to

select at least two priorities with one health disparity to be addressed. Available data on prevalence, emergency department visits, hospitalizations, mortality, and trends were included for each indicator. Equity data for gender, age, race/ethnicity, and neighborhood groupings were presented as available. Prior to the presentation, the full data set reviewed by the Prevention Agenda Work Group was made available to Capital Region partners on the HCDI website (http://hcdiny.org/). Presentations can be found by selecting "Explore by County" and opening the "2019 Prevention Agenda Prioritization Presentation" under the "County Data and Resources" section.

After the presentation of each set of health indicators, a discussion was held to answer any questions, and for individuals to share their experiences with the health condition in the population. Participants were encouraged to consider the importance of the condition in the community based on three qualitative dimensions: what the data and organizational experiences suggested; if there was community awareness and concern about the condition; and the opportunity to prevent or reduce the burden of this health issue on the community. Participants were provided with a Prioritization Tracking Tool to record their own comments and measure their thoughts on the local experience, community value, and potential opportunity regarding each health indicator.

Upon completion of the data summaries, Prevention Agenda Prioritization Work Groups members were given an opportunity to advocate for the priorities they believed were most meritorious and the group voted on the top two Prevention Agenda categories. Mental health, behavioral health, and chronic disease categories received the greatest amount of votes by far, because they impacted the largest number of people in the most significant ways, both directly and indirectly, through their influence on other health conditions. They also contributed most significantly to the cost of health care. A summary of the Albany-Rensselaer Prevention Agenda Prioritization Work Group is below.

# Albany-Rensselaer Prevention Agenda Prioritization Work Group

The Albany-Rensselaer Prevention Agenda Prioritization Work Group was led by the Albany County Department of Health, the Rensselaer County Department of Health, Albany Medical Center, and St. Peter's Health Partners. Because the hospitals' catchment areas cover both counties, it was felt a joint county Albany-Rensselaer Prevention Agenda Prioritization Work Group was appropriate. Meetings were held on March 1, 2019 and March 21, 2019 at which HCDI presented data for the heath indicators selected by the Prevention Agenda Work Group, and facilitated discussions. The Power Point data presentations used during these meetings were made available to the Albany-Rensselaer Prevention Agenda Prioritization Work Group members and the public on the HCDI website (http://www.hcdiny.org/). Attendance during the two prioritization meetings consisted of 89 participants representing healthcare, community based and public service providers. Participants were engaged in the data presentations, raised many questions, and offered a service provider's perspective.

Organizations participating in the Albany-Rensselaer Prevention Agenda Prioritization Work Group included:

- Albany County Department for Aging
- Albany County Department of Health
- Albany County Department of Mental Health
- Albany Medical Center Alliance for Better Health
- Alliance for Positive Health
- AVillage, Inc.
- Better Health for Northeast New York, Inc.
- Blue Shield of Northeastern New York, Inc.
- Burdett Birth Center

- Capital District Boys and Girls Club
- Capital District Physicians' Health Plan
- Capital District Tobacco-Free Coalition
- Capital Roots
- Catholic Charities of the Diocese of Albany
- Cornell Cooperative Extension
- Healthy Capital District Initiative
- Hudson Valley Community College
- Independent Living Center of the Hudson Valley
- MVP Health Care, Inc.
- Promesa/Camino Nuevo
- Rensselaer County Department of Health
- Rensselaer County Department of Mental Health
- St. Peter's Health Partners
- The Baby Institute
- The Food Pantries for the Capital District
- United Way of the Greater Capital Region
- Upper Hudson Planned Parenthood
- Whitney M. Young Health, Jr. Health Center

During the diabetes data presentation, there was discussion on how pre-diabetes data is unavailable, and most individuals with pre-diabetes are unaware of their condition. Diabetes is one of the most expensive health conditions because of its sequelae, yet it can be prevented with early diagnosis and management. Participants also suggested that obesity data may underrepresent the issue, as those who are overweight but not clinically obese are not represented. Obesity was discussed as an "upstream" issue and a root cause for many other health problems.

During the asthma data presentation participants reflected on the stunning racial and ethnic disparities. Interventions should be culturally competent, and take into account environmental factors such as how living near a train affects air quality. Smoking was discussed as a similarly disparate health indicator, and participants raised concerns about e-cigarettes and a recent increase in the use of traditional tobacco.

When discussing mental health and substance use, participants remarked about decreased physician prescribing of opioids, but expressed concern about increased mental health hospitalizations and a lack of access to pediatric mental health services.

# **Continuing Projects and Additional Health Challenges**

Within the previous 2016-2018 CHIP cycle, Rensselaer County's priorities included obesity, asthma, and opioid use. These priorities will continue to be targeted in the 2019-2021 CHIP cycle, in addition to tobacco use. Since prioritizing obesity, Rensselaer County Educators have conducted public health detailing to over 50 provider offices regarding Prediabetes Screening and resources. National Diabetes Prevention Program services provided within the County reached over 100 residents. In 2018 alone, Rensselaer County held 35 Naloxone trainings, reaching over 400 residents in an attempt to decrease opioid overdose deaths. To reduce asthma, Rensselaer County's Environmental Division's Asthma Educator visited over 100 residents to improve their self-management skills. Healthy Neighborhoods provided over 500 environmental education and remediation visits to residents who may be experiencing asthma or other air quality concerns.

Rensselaer County recognizes that its residents face health challenges that were not chosen as a CHIP priority. The County will continue activities to address additional health concerns of the community, including sexually transmitted infections (STIs), vaccinations, and tick borne diseases. Public health education will be a key component to addressing these additional health issues. Rensselaer County Department of Health offers clinics for vaccinations as well as the screening and treatment of STIs.

# 2. Goals, Objectives, Interventions, and Process Measures

Priority Area: Prevent Chronic Diseases/ Promote Healthy Women, Infants, and Children

Focus Area: Healthy Eating/Perinatal and Infant Health/Food Security

NYS Prevention Agenda	Objectives	Interventions	<b>Process Measures</b>
Goals			
1.2 Increase skills and knowledge to support healthy food and beverage choices	By December 31, 2021, decrease childhood obesity rate by 2% (from 16.4% in 2016-2018 to 14.4% among public school students by 2021).	Multi-component school- based obesity prevention interventions – through a school district	Number of meetings attended Number of students and faculty reached
			Number of students and faculty reporting increased physical activity and/or healthy eating at the end of each school year
1.2 Increase skills and knowledge to support healthy food and	By December 31, 2021, decrease childhood obesity rate by 2% (from 16.4% in	Multi-component school- based obesity prevention interventions – through a	Number of meetings held
beverage choices	2016-2018 to 14.4% among public school students by 2021).	County Coalition	Number of Coalition participants
	By December 31, 2021, decrease the percentage of adults ages 18 years and older with obesity by 2% (from 30.4% in 2016 to 28.4% by 2021).		Number of students and community members reporting increased physical activity and/or healthy eating at the end of each school year

2.2 Increase	By 2021, increase the	Increase access to primary	Number of provider
Breastfeeding	number of primary care	care practices that are	offices visited
	practices with breastfeeding policies by 3 offices.	supportive of breastfeeding	Potential number of health professionals reached
			Number of offices with breastfeeding policies
2.2 Increase Breastfeeding	By December 31, 2021, increase the number of worksites with breastfeeding	Increase support for breastfeeding in the workplace	Number businesses visited by RCDOH
	friendly policies among the		Number of new
	top 20 businesses in the		worksite
	county by 20%.		breastfeeding
			policies adopted

Priority Area: Prevent Chronic Diseases

Focus Area: Physical Activity

NYS Prevention Agenda	Objectives	Interventions	Process Measures
Goal 2.2 Promoto cohool	D. Dagarahar 21, 2021	2.2.2 Imaging out a	Number of weaksite wells as
Goal 2.2 Promote school, child care and worksite	By December 31, 2021,	2.2.2 Implement a combination of	Number of worksite wellness
	decrease the		classes offered
environments that increase	percentage of adults	worksite-based physical	N
physical activity	ages 18 years and older	activity policies,	Number of employees
	with obesity by 2%	programs, or best	attending wellness classes
	(from 30.4% in 2016 to	practices through multi-	Nh an af awardaaa
	28.4% by 2021).	component worksite	Number of employees
		physical activity and/or	reporting weight loss
		nutrition programs;	
		environmental supports	
		or prompts to	
		encourage walking	
		and/or taking the stairs; or structured walking-	
		based programs focusing on overall	
		physical activity that	
		include goal-setting,	
		activity monitoring,	
		social support,	
		counseling and health	
		promotion messaging.	
Goal 2.3 Increase access,	By December 31, 2021,	2.3.1 Implement	Number of routes created
for people of all ages and	decrease childhood	and/or promote a	
abilities, to indoor and/or	obesity rate by 2%	combination of	Potential number of
outdoor places for physical	(from 16.4% in 2016-	community walking,	residents reached
activity.	2018 to 14.4% among	wheeling, or biking	
,	public school students	programs, combined	Number who report utilizing
	by 2021).	with onsite marketing,	routes
	, ,	community outreach,	
	By December 31, 2021,	and safety education.	Number of maps distributed
	decrease the	,	·
	percentage of adults		
	ages 18 years and older		
	with obesity by 2%		
	(from 30.4% in 2016 to		
	28.4% by 2021).		

Priority Area: Prevent Chronic Diseases Focus Area: Tobacco Prevention

NYS Prevention Agenda	Objectives	Interventions	Process Measures
Goals	•		
Goal 3.1 Prevent initiation	By December 31, 2021,	3.1.2 Use media and	Number of educational
of tobacco use	decrease the	health communications	events held
	prevalence of vaping	to highlight the dangers	
	product use by high	of tobacco, promote	Number of residents
	school students by 2%	effective tobacco	reached
	(from 20.6% in 2016 to	control policies and	
	18.6% by 2021.)	reshape social norms.	
	By December 31, 2021,		
	decrease the		
	prevalence of vaping		
	product use by young		
	adults age 18-24 years		
	by 2% (from 9.1% in		
	2016 to 7.1% by 2021).		
Goal 3.2 Promote tobacco	By December 31, 2021,	Provide the Butt Stops	Number of educational
use cessation	decrease the	Here tobacco cessation	cessation classes held
	prevalence of cigarette	program	
	smoking among adults		Total number of residents
	ages 18 years and older		reached
	by 2% (from 18.3% in		
	2016 to 16.3% by 2021).		Number of participants
			who complete the program
	By December 31, 2021,		
	decrease the		
	prevalence of vaping		
	product use by young		
	adults age 18-24 years		
	by 2% (from 9.1% in		
	2016 to 7.1% by 2021).		
Goal 3.2 Promote tobacco	By December 31, 2021,	3.2.1 Assist medical and	Number of patients
use cessation	decrease the	behavioral health care	screened for tobacco use
	prevalence of cigarette	organizations (defined	
	smoking among adults	as those organizations	Number of patients who
	ages 18 years and older	focusing on mental	screened positive for
	by 2% (from 18.3% in	health and substance	tobacco use
	2016 to 16.3% by 2021).	use disorders) and	Number of referred for
	Dy Dogomber 24, 2024	provider groups in	Number of referrals for
	By December 31, 2021, decrease the	establishing policies, procedures and	tobacco cessation
	prevalence of vaping	workflows to facilitate	assistance (inclusive of
	product use by young		vaping products) to the NYS Smoker's Quitline in
	, , , ,	the delivery of tobacco dependence treatment,	Rensselaer County
	adults age 18-24 years	•	hensselder County

NYS Prevention Agenda Goals	Objectives	Interventions	Process Measures
	by 2% (from 9.1% in 2016 to 7.1% by 2021)	consistent with the Public Health Service Clinical Practice Guidelines, with a focus on Federally Qualified Health Centers, Community Health Centers and behavioral health providers.	
Goal 3.3 Eliminate exposure to secondhand smoke	By December 31, 2021, decrease the prevalence of vaping product use by high school students by 2% (from 20.6% in 2016 to 18.6% by 2021.)  By December 31, 2021, decrease the prevalence of cigarette smoking among adults ages 18 years and older by 2% (from 18.3% in 2016 to 16.3% by 2021).  By December 31, 2021, decrease the prevalence of vaping product use by young adults age 18-24 years by 2% (from 9.1% in 2016 to 7.1% by 2021).	3.3.3 Conduct community education to increase community knowledge of the dangers of secondhand smoke exposure and secondhand aerosol/emission exposure from electronic vapor products.	Number of educational events held  Number of residents reached

Priority Area: Prevent Chronic Diseases

Focus Area: Chronic Disease Preventive Care and Management

NYS Prevention Agenda	Objectives	Interventions	Process Measures
Goals			
Goal 4.3 Promote evidence-based care to prevent and manage chronic diseases including asthma, arthritis, cardiovascular disease, diabetes and prediabetes and obesity	By December 31, 2021, decrease the percentage of adults ages 18 years and older with obesity by 2% (from 30.4% in 2016 to 28.4% by 2021).	4.3.5 Promote referral of patients with prediabetes to an intensive behavioral lifestyle intervention program modeled on the Diabetes Prevention Program to achieve and maintain 5% to 7% loss of initial body weight and increase moderate-intensity physical activity (such as brisk walking) to at least 150 min/week.	Number of practices reached  Number of healthcare professionals educated on the CDC's Pre Diabetes Evidenced Based Screening tool
Goal 4.4 In the community setting, improve selfmanagement skills for individuals with chronic diseases, including asthma, arthritis, cardiovascular disease, diabetes and prediabetes and obesity	By December 31, 2021, decrease the percentage of adults ages 18 years and older with obesity by 2% (from 30.4% in 2016 to 28.4% by 2021).	4.4.2 Expand access to evidence-based self-management interventions for individuals with chronic disease (arthritis, asthma, cardiovascular disease, diabetes, prediabetes, and obesity) whose condition(s) is not well-controlled with guidelines-based medical management alone.	Number of unique participants  Number of classes held  Number of participants who completed the program
Goal 4.4 In the community setting, improve self-management skills for individuals with chronic diseases, including asthma, arthritis, cardiovascular disease, diabetes and prediabetes and obesity	By December 31, 2021, decrease the asthma emergency department visit rate per 10,000 for all age groups for Troy/Lansingburgh by 2% (from 109.8/10,000 in 2012-2016 to 107.6/10,000 by 2021)  By December 31, 2021, decrease the asthma hospitalization rate per	4.4.2 Expand access to evidence-based self-management interventions for individuals with asthma that is not well-controlled with guidelines-based medical management alone.	Number of Asthma Coalition meetings held  Number of meeting participants  Number of potential residents reached

NYS Prevention Agenda	Objectives	Interventions	Process Measures
Goals	10,000 for all age groups for Troy/Lansingburgh by 2% (from 22.8/10,000 in 2012-2016 to 22.3/ 10,000 by 2021).		
Goal 4.4 In the community setting, improve selfmanagement skills for individuals with chronic diseases, including asthma, arthritis, cardiovascular disease, diabetes and prediabetes and obesity	By December 31, 2021, decrease the asthma emergency department visit rate per 10,000 for all age groups for Troy/Lansingburgh by 2% (from 109.8/10,000 in 2012-2016 to 107.6/10,000 by 2021)  By December 31, 2021, decrease the asthma hospitalization rate per 10,000 for all age groups for Troy/Lansingburgh by 2% (from 22.8/10,000 in 2012-2016 to 22.3/	4.4.2 Expand access to evidence-based self-management interventions for individuals with asthma that is not well-controlled with guidelines-based medical management alone.	Number of residents reached  Number of subsequent referrals made  Number of kits distributed
Goal 4.4 In the community setting, improve selfmanagement skills for individuals with chronic diseases, including asthma, arthritis, cardiovascular disease, diabetes and prediabetes and obesity	10,000 by 2021).  By December 31, 2021, decrease the asthma emergency department visit rate per 10,000 for all age groups for Troy/Lansingburgh by 2% (from 109.8/10,000 in 2012-2016 to 107.6/10,000 by 2021)  By December 31, 2021, decrease the asthma hospitalization rate per 10,000 for all age groups for Troy/Lansingburgh by 2% (from 22.8/10,000 in 2012-2016 to 22.3/10,000 by 2021).	4.4.2 Expand access to evidence-based self-management interventions for individuals with asthma that is not well-controlled with guidelines-based medical management alone.	Number of referrals received  Number of initial visits that have been conducted  Number of follow up visits that have been conducted

Priority Area: Promote Well-Being and Prevent Mental and Substance Use Disorders

Focus Area: Promote Well-Being

NYS Prevention Agenda	Objectives	Interventions	Process Measures
Goals			
Goal 1.2 Facilitate supportive environments that promote respect and dignity for people of all ages	By December 31, 2021, reduce the age-adjusted suicide mortality rate by 10% (from 12.5/100,000 in 2014-2016 to 11.25/100,000 by 2021).	1.2.2 Mental Health First Aid is an evidence- based public education program that teaches people how to respond to individuals who are experiencing one or more acute mental health crises (such as suicidal thoughts or behavior, an acute stress reaction, panic attacks or acute psychotic behavior) or are in the early stages of one or more chronic mental health problems (such as depressive, anxiety or psychotic disorders, which may occur with substance abuse).	Number of training events held  Number of staff trained  Number of staff that report using Mental Health First Aid
Goal 1.2 Facilitate supportive environments that promote respect and dignity for people of all ages	By December 31, 2021, reduce the age-adjusted suicide mortality rate by 10% (from 12.5/100,000 in 2014-2016 to 11.25/100,000 by 2021).	Psychological First Aid (PFA) is an evidence-informed modular approach to help children, adolescents, adults, and families in the immediate aftermath of disaster and terrorismit is designed to reduce the initial distress caused by traumatic events.	Number of trainings held  Number of participants trained in Rensselaer County  Number of participants that responded "Agree" or "Strongly Agree" that (1) PFA will be useful in their work/personal life, and (2) After the training, the participant feels prepared to utilize skills learned

Priority Area: Promote Well-Being and Prevent Mental and Substance Use Disorders Focus Area: Promote Mental and Substance Use Disorders Prevention

NYS Prevention Agenda	Objectives	Interventions	Process Measures
Goals Goal 2.2 Prevent opioid	By December 31, 2021,	2.2.1 Increase	Number of policies adopted
overdose deaths	reduce overdose deaths	availability of/access	and trainings offered for
overdose dedins	involving any opioid by	and linkages to	providers
	2% (from 8.4/100,000 in	medication-assisted	•
	2016 to 8.23/ 100,000	treatment (MAT)	Number of inmates offered
	by 2021).	including	MAT
		Buprenorphine for residents.	Number of inmates who
		residents.	initiated pharmacotherapy
Goal 2.2 Prevent opioid	By December 31, 2021,	2.2.2 Increase	Number of training events
overdose deaths	reduce overdose deaths	availability of/access to	held
	involving any opioid by	overdose reversal	
	2% (from 8.4/100,000 in	(Naloxone) trainings to	Number of residents and
	2016 to 8.23/ 100,000 by 2021).	prescribers, pharmacists and	businesses trained
	by 2021).	consumers	Number of Narcan
			administrations reported by
			residents and businesses
			Number of law
			enforcement agencies and
			officers trained
			Number of officers
			reporting administering
			Narcan
			Number of inmates trained
Goal 2.2 Prevent opioid	By December 31, 2021,	2.2.2 Increase	Number of N-CAP
overdose deaths	reduce overdose deaths	availability of/access to	compliance checks
	involving any opioid by 2% (from 8.4/100,000 in	overdose reversal (Naloxone) trainings to	conducted
	2016 to 8.23/ 100,000	prescribers,	Number of N-CAP
	by 2021).	pharmacists and consumers	compliant pharmacies

NYS Prevention Agenda Goals	Objectives	Interventions	Process Measures
Goal 2.2 Prevent opioid overdose deaths	By December 31, 2021, reduce overdose deaths involving any opioid by 2% (from 8.4/100,000 in 2016 to 8.23/100,000 by 2021).	2.2.4 Build support systems within the medical field to care for opioid users or at risk of an overdose	Number of hospital systems that adopt a new policy
Goal 2.2 Prevent opioid overdose deaths	By December 31, 2021, reduce overdose deaths involving any opioid by 2% (from 8.4/100,000 in 2016 to 8.23/100,000 by 2021).	2.2.4 Build support systems to care for opioid users or at risk of an overdose – Helpline phone number	Number of Helpline calls received  Number of callers enrolled in treatment
Goal 2.2 Prevent opioid overdose deaths	By December 31, 2021, reduce overdose deaths involving any opioid by 2% (from 8.4/100,000 in 2016 to 8.23/100,000 by 2021).	2.2.4 Build support systems to care for opioid users or at risk of an overdose - ODMAP	Number of overdoses entered into ODMAP system,  Number of EMS agencies registered for ODMAP  Number of law enforcement agencies registered for ODMAP  Number of post-overdose
Goal 2.5 Prevent suicides	By December 31, 2021, reduce overdose deaths involving any opioid by 2% (from 8.4/100,000 in 2016 to 8.23/100,000 by 2021).	2.5.2 Strengthen access and delivery of suicide care - Zero Suicide: Zero Suicide is a commitment to comprehensive suicide safer care in health & behavioral health care systems.	visits by a CRPA  Number of Suicide Prevention Task Force meetings attended  Number of educational events held  Number of residents reached
Goal 2.5 Prevent suicides	By December 31, 2021, reduce overdose deaths involving any opioid by 2% (from 8.4/100,000 in 2016 to 8.23/100,000 by 2021).	2.5.2 Strengthen access and delivery of suicide care - Zero Suicide: Zero Suicide is a commitment to comprehensive suicide safer care in health &	Percent of patients who were screened for suicide during reporting period

NYS Prevention Agenda Goals	Objectives	Interventions	Process Measures
		behavioral health care systems.	
Goal 2.5 Prevent suicides	By December 31, 2021, reduce overdose deaths involving any opioid by 2% (from 8.4/100,000 in 2016 to 8.23/100,000 by 2021).	2.3.1 Integrate trauma informed approaches in training staff and implementing program and policy	Number of staff trained in ACES

# **Local Health Department Involvement**

# A. Reduce Obesity and Prevent Diabetes

# **Healthy Eating and Food Security**

To address childhood obesity and wellness, a Public Health Educator from Rensselaer County DOH currently chairs the Wellness Committee for a local school district. Activities of the school's Wellness Committee include hosting an annual faculty and staff wellness day and arranging for community players to offer wellness classes. The Committee also runs a health education program for the school and provides health education materials for the parents. The Educator will continue to chair this committee through the next CHIP cycle.

Rensselaer County DOH and Albany County DOH have agreed to the promotion of breastfeeding as an activity to include under the Healthy Eating focus area. Breastfeeding is known to benefit both mother and child. Breastmilk offers preventative qualities for infants, including the reducing the risk for developing obesity and improved immunity against viruses and other complications. viii For mothers, breastfeeding has been found to reduce the risk of Type 2 diabetes, high blood pressure, and certain cancers. viii Rensselaer County DOH is currently a subcontractor for SPHP's Creating Breastfeeding Friendly Communities (CBFC) grant. Three of the main priorities of the CBFC grant are to "Increase the number of worksites that provide accommodations for breastfeeding employees," "Increase the knowledge and skills of community-based organizations, primary care providers, childcare directors and staff and employers," and "Increase the number of obstetric, family medicine, midwifery and pediatric practices serving Medicaid-eligible women and their children that achieve the NYS Breastfeeding Friendly Practice designation." Rensselaer County DOH is working to educate employers and the community about the benefits of breastfeeding, primarily through public health detailing completed by Public Health Educators. RCDOH can provide businesses with assistance creating a breastfeeding policy and/or a room for expressing breastmilk. There is one Baby Café located within Rensselaer County, which is promoted by Public Health Educators while detailing and tabling at community events. The Baby Café is an evidenced-based breastfeeding peer support group based out of a Community Action Agency located in the City of Troy. Rensselaer County DOH hosts the Rensselaer County Breastfeeding Coalition on a quarterly basis, which gathers community service providers, health providers, and other professionals who work with parenting women. The Coalition aims to reinforce the work of the CBFC, by improving accessibility to lactation support services and improving the community mentality surrounding breastfeeding.

RCDOH participates in two additional community partnerships that impact the reduction of obesity and diabetes within the County. RCDOH leads the Rensselaer County Wellness Coalition, which consists of over 50 community partners who serve Rensselaer County residents. The Wellness Coalition meets quarterly. For the 2019-2021 CHIP cycle, the Wellness Coalition plans to create and implement programming to target a high-obesity, low service area. RCDOH also participates in the Capital District Obesity-Diabetes Task Force. For the 2019-2021 CHIP cycle, the Obesity- Diabetes Task Force will review and revise their efforts to prevent obesity and type 2 diabetes, and help patients learn how to self-manage while living a healthy lifestyle.

# **Physical Activity**

Rensselaer County DOH plans to create and implement a new employee worksite wellness program. In order to reach the broader adult community, RCDOH is pursuing potential collaborations with local businesses to help them create worksite wellness programs of their own. RCDOH has distributed several local themed walking maps for employees and residents that include the mileage and estimated time for route completion. RCDOH plans to create additional walking maps that would provide "One Mile Walk" options in high-obesity areas within the County. After creating these updated maps, RCDOH will present them to the Rensselaer County Regional Chamber of Commerce and distribute them to residents in the obesity-dense areas.

# **Preventative Care and Management**

RCDOH's greatest focus will be on the identification and management of prediabetes. In November 2019, RCDOH will be partnering with SPHP to host a free biometric screening event for County employees. SPHP clinicians will measure participating employees' glucose, triglyceride, and cholesterol levels. The providers will then explain the results to each individual and provide suggestions to reduce their risk for obesity, diabetes, and other complications. Public Health Educators have been increasing provider education on the Pre-Diabetes Evidenced Based Screening tool as well as promoting the benefits and availability of local National Diabetes Prevention Programs (NDPP) by conducting public health detailing to primary care offices. Two Public Health Educators from RCDOH have been trained as NDPP Lifestyle Coaches. RCDOH will be making arrangements to hold NDPP classes in the community where there is limited access to the service.

#### B. Prevent/Control Asthma, Prevent Tobacco Use

# **Tobacco Prevention**

RCDOH Public Health Educators will continue to provide tobacco education in schools and the community. The effects of secondhand smoke are included as a topic within the tobacco education programs. With the recent increase in e-cigarette use and associated illnesses, two vaping presentations have been developed for the Educators to share. One vaping presentation is designed for the school population, and one for the community population. The 2019 CHNA demonstrated that twice as many high school students reported vaping, compared young adults ages 18-24. An educational presentation

was specifically designed for middle school students as a preventative measure to reduce the rate of high school age vaping use. Rensselaer County is also preparing to host a vaping community forum in 2020 and a second forum in 2021.

In efforts to reduce the initiation of tobacco use, the Environmental Health Division of RCDOH conducts the Adolescent and Tobacco Use Prevention Act Program (ATUPA). ATUPA conducts compliance checks to ensure businesses are not selling tobacco products to youths under 18. ATUPA conducted 179 checks in 2018, finding no violations. ATUPA will continue its activities during the 2019-2021 CHIP cycle.

For this CHIP cycle, RCDOH will begin to offer "The Butt Stops Here" smoking cessation classes at an apartment complex managed by the Troy Housing Authority. Transportation was listed as one of the greatest barriers reported by low income residents in the *2018 Siena Survey*, and the 2016 age-adjusted current smoking rate among low income adults for Rensselaer County was 38.2%, while the average smoking rate in the county was 18.3%. By offering classes on the housing property, RCDOH aspires to reduce the smoking rate disparity between low income residents and the general population.

# **Asthma Preventative Care and Management**

In late 2018, the Health Department's Environmental Division developed the Asthma 360 model to promote integration of asthma service providers, with the overall goal of enabling patients to better self-manage their asthma. The Asthma 360 model involves the incorporation of the patient's school or workplace, pharmacist, home-based intervention team, and primary care provider to develop comprehensive asthma action plans and universal education regarding each patient's medication compliance and asthma triggers. When all facets of a patient's life and care team interact, the patient may be more prepared to control their asthma and reduce their utilization of emergency department services.

A component of Asthma 360 includes the Rensselaer County Healthy Neighborhoods Program (HNP), which conducts home visits to improve the health, safety, living environments, and overall quality of life for residents in targeted neighborhoods. RCDOH works in conjunction with Cornell Cooperative Extension educators to assess the home environment for hazards including indoor air quality, pests, tobacco cessation, ventilation, and additional environmental issues. HNP provides relevant education for residents, intervention materials, and refers individuals to additional assistance in the community. As of November 30 th, 2019, 811 HNP initial home visits were conducted and 196 homes were revisited this year. HNP educators provide the homes visited with free cleaning supplies and products to improve the health and safety of the residence. Additional HNP efforts to reduce asthma triggers include providing residents with mattress and pillow case covers, spacers for medication, and additional asthma related supplies as necessary. The Healthy Neighborhoods Program will continue to work with residents throughout the 2019-2021 CHIP cycle.

Over one third of the HNP homes visited in 2018 had a resident with asthma, who was then referred to the RCDOH Asthma Educator, an additional component of the Asthma 360 model. By November 30<sup>th</sup>, the Asthma Educator had received 208 referrals from HNP for 2019. In 2019, over 230 initial asthma education visits were conducted, and 115 follow up visits were made by November 30<sup>th</sup>. The Asthma Educator discusses asthma triggers, interventions, medications, and asthma action plans

with residents. Rensselaer County has seen a reduction in asthma-related hospitalizations since the initiation of these interventions. The Asthma Educator will continue working with residents diagnosed with asthma throughout the next CHIP cycle.

The efforts of HNP and the Asthma Educator address the disparity in the prevalence of asthma. The City of Troy and Lansingburgh are two of the neighborhoods targeted by the HNP, and as seen in the 2019 CHNA, asthma disproportionately affects residents in these areas. Troy/Lansingburgh also has the highest poverty rate in the county. The HNP reduces the economic burden for residents through the free provision of materials to decrease environmental asthma triggers.

RCDOH employees from the Education and Environmental divisions participate in the Asthma Coalition of the Capital Region (ACCR), and will continue to do so in the upcoming CHIP cycle. The mission of the ACCR is for relevant community providers to coordinate sustainable initiatives that will reduce the burden of asthma in NY's Capital Region. The Coalition provides asthma resources, education, and self-management tools to support evidence-based asthma care in the region.

#### C. Prevent Mental and Substance Use Disorders

#### **Prevent Mental Disorders**

As suicide rates in the County have risen, RCDOH has increased its involvement in prevention activities. The number of suicides that occurred in 2018 in Rensselaer County was 36.8% greater than the number of 2012 County suicides. The RCDOH Director was asked to participate in the Rensselaer County Suicide Prevention Task Force, organized by the Rensselaer County Department of Mental Health. For this CHIP cycle, RCDOH will focus on increasing the availability of preventative interventions and community education. RCDOH will work with the Mental Health Association in NY State (MHANYS) to offer *Mental Health First Aid* training to staff and residents of Rensselaer County. *Mental Health First Aid* is an evidenced-based program that prepares individuals, both lay persons and professionals, to respond to others in an acute mental health crisis<sup>xi</sup>.

RCDOH's Public Health Preparedness Training and Exercise Educator currently provides *Psychological First Aid* (*PFA*) training to community organizations and members. *PFA* is an "evidence-informed... approach to help children, adolescents, adults, and families in the immediate aftermath of disaster and terrorism". \*ii *Psychological First Aid* is used in the immediate aftermath of a traumatic event to reduce the distress and anxiety individuals often experience. *PFA* is a mental health crisis preventative measure, as some individuals may not be able to healthily cope in the wake of a disaster.\* \*ii *PFA* will prepare community members and local organizations to provide psychological care to residents immediately following a tragic event.

The 2019-2024 NYS Prevention Agenda has included trauma-informed training as a recommended intervention to Prevent and Address Adverse Childhood Experiences (ACEs). Rensselaer County Department of Health plans to have relevant staff receive ACEs training. ACEs have been found to impact many facets of health, including the priorities that were chosen to be addressed in this CHIP cycle. Higher ACE scores have been correlated with an increased risk for diabetes, obesity, physical

inactivity, depressed mood, and suicide attempts<sup>xiii</sup>. Lynch et al. found that the reporting of a single ACE may increase an individual's risk for diabetes in adulthood by 11%<sup>xiv</sup>. ACEs have also been linked to the early initiation<sup>xv</sup> and the continuation of tobacco use<sup>xvi</sup>. RCDOH is promoting ACES training as an evidence-based practice for staff to mitigate the negative sequelae of Adverse Childhood Experiences.

#### **Prevent Substance Use Disorders**

In addition to the focus on suicide prevention, RCDOH will continue its efforts to reduce opioid misuse and death. RCDOH began its second year as a recipient of the Opioid Crisis Funding Grant in September 2019. The focus for this year is linkage to care. RCDOH is partnering with the Rensselaer County Bureau of Public Safety to establish the ODMAP system in Rensselaer County, which will allow first responders and relevant health professionals to track suspected overdoses in the area. The system is expected to launch in early 2020. Through the Opioid Crisis Grant, RCDOH will provide funding to the Rensselaer County Department of Mental Health to hire a Certified Recovery Peer Advocate (CRPA) to respond to post-overdoses identified in ODMAP. The CRPA can provide Naloxone training to those impacted by the overdose, and assist interested individuals with enrollment in recovery services. RCDOH Public Health Educators will continue to conduct pharmacy detailing to ensure pharmacies are following N-CAP procedures that increase public access to Naloxone.

The RCDOH Director co-chairs The Rensselaer County Heroin Coalition with the Rensselaer County Sheriff. The goal of the coalition is to take back our community from the affliction of opioid addiction by educating and raising public awareness through multiple means and venues, forming a multi-layered shield for the purpose of prevention, treatment and recovery. The coalition is comprised of six subgroups: Community Education, Treatment and Harm Reduction, Law Enforcement, Data, Legislation and Medical professionals. The Heroin Coalition continues to meet every six weeks, with a listserv of over 2,000 members, 200 participating community organizations, and coalition attendance regularly exceeding seventy five people. Each month in 2019, the Heroin Coalition supported Take Back Days that were hosted by the County Sheriff.

RCDOH is a registered NYSDOH Opioid Overdose Prevention Program, which allows qualified RCDOH staff to train professionals and community members to recognize, respond and administer Naloxone. RCDOH has 4 staff members who can provide community Naloxone trainings. Between January 2019 and November 2019, over 900 residents have received Naloxone training from RCDOH staff. Several local businesses have requested and received Naloxone training. RCDOH will continue to offer community Naloxone trainings in an effort to reduce opioid overdose deaths.

In 2019 RCDOH provided Naloxone training to the City of Troy Police Department, which has equipped 78 sworn police officers to carry and administer Naloxone. RCDOH has made agreements with two additional local law enforcement agencies to provided Naloxone trainings for their officers in 2020. RCDOH plans to continue expanding access to Naloxone trainings for law enforcement officers throughout the upcoming CHIP cycle.

The Rensselaer County Medical Examiner has found a strong correlation between release from incarceration and fatal opioid overdoses. Individuals often administer the amount of opioids they had used prior to incarceration, not realizing they had lost the tolerance they had previously developed.

RCDOH has established a partnership with the Rensselaer County Jail and as of summer 2019, provides monthly Naloxone trainings for inmates. As of December 2019, 86 inmates have received training, and will be given a Naloxone kit upon release from custody. 23 visitors have received Narcan training to prepare them for the homecoming of their loved one.

To increase resident awareness and utilization of available local substance use services, RCDOH created the Rensselaer County Recovery Helpline in October 2018. The Helpline allows County residents to call for substance use information, resources, or referrals to area providers. Since 2018, the Helpline received over 450 calls, placed 26 people in treatment, and trained 90 Helpline volunteers.

# **Engagement of Partners and Tracking Progress**

To maintain engagement with community partners, RCDOH will continue to participate in the various committees, coalitions, and task forces that focus on the priority areas chosen for this CHIP cycle. Existing task forces will have their scope modified or new task forces will be established to develop and implement Community Health Improvement Plan interventions for each of the priority areas selected. For example, the existing Obesity-Diabetes Task Force will review and revise their efforts to prevent obesity and type 2 diabetes, and help patients learn how to self-manage and live a healthy lifestyle. To address asthma and tobacco use, the Counties will build on existing efforts of the Healthy Neighborhood Programs, Delivery System Reimbursement Incentive Payment Program (DSRIP) Performing Provider Systems (PPS), Green and Healthy Homes Initiative®, and Capital District Tobacco-Free Communities, who currently partners with the Albany County Strategic Alliance for Health, as well as the Asthma Coalition of the Capital Region. Addressing mental health will require collaboration with both Albany and Rensselaer counties' Departments of Mental Health. Mental health interventions may also integrate DSRIP (Delivery System Reimbursement Incentive Payment Program), PPS and health homes. The Rensselaer County Wellness Coalition meets quarterly, which provides an opportunity to assess CHIP progress and barriers with local stakeholders. Interventions may be changed accordingly after reviewing data, best practices, and receiving input from the community partners.

# Dissemination of the CHNA and CHIP

As of October 2019, the 2019 Capital Region Community Health Needs Assessment, composed by HCDI, and the 2019-2024 NYS Prevention Agenda were linked to the Rensselaer County Department of Health website for the public to access. The 2019 CHNA has been discussed at the recent quarterly Rensselaer County Breastfeeding Coalition and the Rensselaer County Wellness Coalition meetings. The 2019-2021 Rensselaer County CHIP will be reviewed by the Rensselaer County Board of Health, published on the County website, and distributed to relevant entities.

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