

Long Island Population Health Improvement Program (LIPHIP) Attendance & Meeting Summary: January 12, 2017 9:30-11:30am

Member Attendance: See list attached

<p>Welcome & Introductions</p>	<p>Janine Logan, Nassau-Suffolk Hospital Council/Long Island Health Collaborative welcomes committee members to the December Long Island Health Collaborative Meeting.</p>
<p>LIHC PHIP Establishment and Role</p>	<p>Janine Logan, Nassau Suffolk Hospital Council provides a background on the institution of the Long Island Health Collaborative and Population Health Improvement Program. The Long Island Health Collaborative programs and initiatives belong to members. The role of the PHIP team includes convening key players, building consensus, organizing projects and supporting the needs of members as related to population health strategies.</p>
<p>Announcements and Updates</p> <ul style="list-style-type: none"> • School and Library Engagement • Island Harvest Healthy Food Drive • PHIP 2017 Workplan and Steering Committee 	<p>As key players in the field of population health, schools and libraries will be targeted as potential venues to disseminate information about the Long Island Health Collaborative and the Are You Ready, Feet™ campaign to the public. Within the first quarter of 2017, a mailing will be conducted to every Long Island based school and library with a letter of introduction and information about the campaign. Members of the Long Island Health Collaborative are encouraged to bring promotional material to any programs they are scheduled to facilitate in the library or school setting.</p> <p>In 2016 the PHIP partnered with Sustainable Long Island to collect 46 pounds of healthy donations. This year, Island Harvest is working with us to launch a collection leading up to National Nutrition Month. Members are encouraged to bring donations to any meetings they</p>

attend at the Nassau-Suffolk Hospital Council offices between now and March 31, 2016.
Leading a healthy food drive is consistent with the LIHC's focus on reducing obesity and chronic disease on Long Island.

The PHIP year 3 work plan has been handed out to all meeting attendees. This plan is extremely close to finalization with the NY State Department of Health. Year three of grant funding begins 1/15/17 and runs through 1/14/18. Within this contract, there is opportunity for a continued funding period of two years.

Within the Population Health Improvement Program charter document, the function of the Steering Committee and LIHC are clearly defined. With the start of 2017, Janine Logan, Nassau-Suffolk Hospital Council takes the time to review these items with members of the collaborative.

Steering Committee provides governance and consistency of purpose and messaging at all levels. It reviews proposed documents and policies, supervises timely execution of LIPHIP work plan activities, makes recommendations regarding LIPHIP operations, and serves in an advisory council capacity to the industry partners' subgroup. Meets bi-monthly.

Two new members have been added to the Steering Committee in 2017 including Robert Hettenbach, Executive Director, Nassau-Queens PPS and Thomas Check, President/CEO at Healthix.

Long Island Health Collaborative (LIHC) is the core workgroup of the LIPHIP, as its diverse membership is the embodiment of population health. Tasks and activities are accomplished through a subgroup structure, with staffing and other operational needs met by the LIPHIP staff. Meets monthly.

<p>2016 PHIP Accomplishments</p>	<p>Each quarter we submit a list of accomplishments to the state as part of our quarterly reporting requirements. Our list from 2016 was incredibly robust so the PHIP team worked to compile an annual report with quantifiable and visual components that effectively outline our progress over the past year. Kim Whitehead, Population Health Improvement Program was the master behind synthesizing and creative layout of the information within the document. To view this report, please visit: https://www.lihealthcollab.org/2016-year-end-recap.aspx</p> <p>Dr. Lawrence Eisenstein, Commissioner, Nassau County Department of Health, emphasizes the importance of measuring population health outcomes as a way to support the need for continuation of the PHIP program. In addition to metrics established through PHIP programming including the community wellness portal and program engagement numbers, this may be accomplished by collecting internal performance measures from partner organizations. This extremely important consideration will become an area of focus in 2017.</p>
<p>Data Projects</p>	<p>Michael Corcoran, Population Health Improvement Program announces the data workgroup will be reconvened in early February to drive data analysis efforts.</p> <p>A reminder that Community Needs Assessments, Improvement Plans and Service Plans were due by the end of December. Please send the final documents to us as we would like to develop a centralized location on the LIHC website to host them.</p> <p>Data for 2015 Geocoding SPARCS data is now complete. This data allows us a look at the census tract level, which is more specific than zip code giving us detailed insight into community level populations.</p> <p>Michael Corcoran traveled to Data Gen, our data contractor for an in-person run through of their data acquisition, capabilities and ongoing projects. From this meeting, he was able to take away</p>

innovative ideas for new collaborative driven projects which will be presented to members of the data workgroup in February.

The PHIP is working with the Asthma Coalition's schools committee to develop data toolkits at the school district level which will support districts as they look to apply for Federal funding to address chronic disease or asthma rates. These toolkits will include information related to asthma and obesity rates, data on absenteeism as well as community level information on each Long Island school district. A webinar will be held to inform interested districts about how to use the toolkit. Toolkits will also be available to LIHC partners who are working within school districts on various intervention strategies.

Michael Corcoran, PHIP has put together a Population Health Dashboard. This dashboard will exist on the LIHC website with hopes that it will be used to see trends across years for various measures for various geographies. Some of the measures are found on the Prevention Agenda Dashboard while others will come from the Vital Statistics and SPARCS database that the LIHC has access to.

A draft report is presented, identifying the primary areas of concern as identified by Long Island community members via the Prevention Agenda Community Member Survey. In the past, this data was presented at the County-level. As we drill down, we can see that particular zip codes have varied opinions about the needs of their community. The communities highlighted within this report include the select communities as defined by Nassau County Department of Health and target zip codes as defined by Suffolk County Department of Health. Members express interest in further development of this report.

<p>Workgroup Projects and Revitalization</p>	<p>In 2017, we look to reconvene and reset our workgroups. Members of LIHC/PHIP workgroups drive projecting through the collaborative. Our hope is that these workgroups will meet more frequently in 2017. The purpose of full monthly meetings is to update collaborative members on status of projects being driven by workgroup members. To reach full collective impact potential, it is important that LIHC members share their expertise by participating on workgroups. All members are encouraged to sign up and ask questions.</p>
<p>Behavioral Health</p>	<p>The behavioral health workgroup is scheduled to meet Monday January 23 at 11:00am. Behavioral health workgroup projects will be developed in alignment with DSRIP milestones.</p>
<p>Public Education, Outreach and Community Engagement</p>	<p>The public education, outreach and community engagement workgroup is next scheduled to meet Thursday, January 26, 2:00pm to discuss further promotion of the Are You Ready, Feet?™ portal through the Ready Feet Rally and various provider engagement strategies. The topic of provider engagement strategies is one stemming from the building bridges events held Fall 2016. During these events, discharge planners, case managers and community service providers were invited to network and learn about services offered by 211 Long Island and HITE. The next step will be to ensure that the same connection is made with service providers on Long Island.</p>
<p>Cultural Competency Health Literacy Train the Trainer Program</p>	<p>The cultural competency/health literacy vendor subgroup, comprised of LIHC members and CCHL umbrella workgroup members of Suffolk Care Collaborative have been meeting to explore locally based vendors with the expertise and capability to develop a tailored CCHL curriculum and host a training for Train the Trainer (TTT) Organizational Leads who will then be able to train the workforce at a limitless number of sessions throughout Long Island. This curriculum will be geared toward community based organizations, social service organizations, local health departments, providers and beyond.</p> <p>After sending an RFP to five vendors, the workgroup received two competitive and high quality proposals from 1199 Training and Employment Fund and Hofstra's National Center for suburban</p>

studies/Health Equity institute. After weighing each program, the subgroup decided to move forward and offer the lead to Hofstra University. Martine Hackett will be leading the project.

Martine Hackett, Assistant Professor of Health Professions at Hofstra University has as a wealth of experience in related trainings, notably taking the lead on a component of the University of Albany's Advancing Cultural Competence program "Addressing Suburban Structures: Health and Latino Communities on Long Island". Martine facilitated the initial Train the Trainer Organizational Lead session on Monday November 7th. This session was a full-day, 7.5 hour session. Post-session, TTTs will come back to their organization to train internal employees. They will leave the program with all the tools they need to facilitate either a 7.5 hour TTT session, or a 2 hour staff session. In addition, they will be asked to facilitate outside trainings within partner organizations. The specifics of this commitment will depend largely on the capacity of the organization. Having a TTT on-site becomes an asset to partner organizations as they are able to provide this program, free-of-cost (aside from overhead), for their community partners. The PHIP team will be responsible for program logistics and providing support to the TTT trainers and connecting TTTs to organizations who request trainings.

Sarah Ravenhall, Program Manager is working closely with all certified trainers to ensure they have what they need to facilitate trainings into the future. Many trainers have expressed plans to wait until after the holiday season to initiate training sessions. Two trainers have completed internal trainings and provided feedback on the feasibility of the program:

- LINCS

- Curriculum was simple to use and designed in a way that allows her to tailor the content to the audience she is presenting to.

- The focus on pockets of underserved communities is a curriculum highlight for her.

	<ul style="list-style-type: none"> • EOC – “Within evaluations, someone commented that they liked how I made them apply it to their everyday workflow. I have learned that when you know your audience, you can personalize the training to them, and that goes a long way” – “This training will increase awareness, reinforce what staff already know, and validate beliefs. – “Martine’s video about suburbs hit home with my audience” <p>Suggestions for program improvement include developing a resource guide that highlights the data shown to define and explain the data indicators more thoroughly. Program updates will be made continuously as we continue to collect feedback from trainers.</p> <p>Measuring program efficacy has been an important consideration as we look to gauge impact and success throughout the region. A comprehensive evaluation plan has been developed that is based upon the Kirkpatrick Four-level Training and Evaluation Model.</p> <ul style="list-style-type: none"> • Reaction: participant reaction to training, instructor and curriculum content • Learning: Were training objectives met? • Behavior: How information is applied post-training • Results: Were targeted health outcomes improved? <p>Evaluation results will be shared as measurement begins.</p>
<p>Adjournment</p>	<p>The next LIPHIP Meeting is scheduled for:</p> <p>February 15, 2017 this meeting will take place at Marcum, 10 Melville Park Rd, Melville NY.</p> <p>We are incredibly thankful for all that our members do to drive LIHC initiatives.</p>

In Attendance: Georgette Beal, United Way of Long Island, Senior Vice President; Monica Caravella, Farmingdale State College, Assistant Professor of Nursing, Gary Carpenter, Marcum, Director of Healthcare Services, Ilene Corina, Pulse Center, President

Advocate; Michael Corcoran, Nassau-Suffolk Hospital Council, Data Analyst; Janine Logan, Nassau-Suffolk Hospital Council; Sarah Ravenhall, Program Manager, Population Health Improvement Program; Lawrence Eisenstein MD MPH, Nassau County Department of Health, Health Commissioner; Marilyn Fabbriante, St. Charles Hospital, Executive Director, Public and External Affairs; Carol Ann Foley, St. Joseph Hospital, Director; Patricia Gilroy, Catholic Health Services, Manager Community Benefits; Sofia Gondal, Suffolk Care Collaborative, Community Engagement Liaison; Doreen Guma, Time to Play Foundation, Founder; Ellen Higgins, SCDOH Maternal Infant Community Health Collaborative; Jenn Benjamin, Family First Home Companions, Owner; Susan Jayson, Suffolk Care Collaborative, Director of Behavioral Health; Kenneth Kataria, Options for Community Living, Care Coordinator; Grace Kelly-McGovern, Suffolk County Department of Health, Public Information Officer; Karyn Kirschbaum, Western Suffolk BOCES; Irene Koundourakis, NuHealth NUMC, Community Outreach Coordinator; Karla Mason, St. Catherine of Siena, Public and External Affairs; Linda Mermelstein, Suffolk County Department of Health, Chief Deputy Commissioner; Anne Marie Montijo, Association for Mental Health and Wellness, Deputy Director for Strategic Initiatives; Matthew Neebe, Town of Smithtown Horizons Counseling and Education, Program Director; Adesuwa Obasohan, SCDOH Office of Minority Health, Health Program Analyst I; Brian Prichard, South Oaks Hospital, Administrator Director; Lauren Roge, Custom Computer Specialist, Healthcare Solutions Manager; Joseph Sarno, NADAP, Senior Voc. Case Manager; Eileen Solomon, Eastern Long Island Hospital, Director of Community Relations; Yvonne Spreckels, Stony Brook University Hospital, Director of Community Relations; Joanne Cantor, Society of St. Vincent de Paul, Program Support Associate; Linda Sweeney, Eastern Long Island Hospital, Executive Director, Foundation/Community Relations; James Tomarken, Suffolk County Department of Health, Commissioner, Board of Health Chair; Luis Valenzuela, Health Education Project/1199 SEIU, Healthcare Advocate; Esperanza Viera, Good Samaritan Hospital, Community Health Educator; Stuart Vincent, John T. Mather Memorial Hospital, Director of Public Relations; Lisa Zimmerman, Evolve Wellness, Health Coach; Kate Zummo, South Nassau Communities Hospital, Director of Education; Charlene Tyson, Sayville Project, Case Management Supervisor; Von Kuhen, Sustainable Long Island, Executive Director; Vanessa Santiago, Family Service League, Program Coordinator; Galal Alzokm, Pilgrim Psychiatric Center, Director Care Management; Adam Rattner, Healthcare Partners, Chief Compliance Officer; Genesis Bayuelo, Health First, Community Engagement Developer; Kenneth Kataria, Options for Community Living, Outreach; Craig Cole, ENTA, Outreach; Mary Emerton, Catholic Health Services, Project Manager DSRIP; Kathy Emmett, Island Harvest, Nutrition Coordinator; Pam Ford, St. Francis Hospital, Manager; Rick Rand, Custom Computer Specialists, Associate Manager; Andy Weitsberg, HIPAA Continuity, President; Halim Kaygisiz, EOC of Suffolk, Director of Health Outreach Services; Tanisha Joseph,

NADAP, Employment Specialist; Laura Lynn Iacono, Long Island Cares, Nutrition Resource Manager; Barbara Laing, NBLCA, Program Coordinator; Fran Ross, Deputy Home Care, Director Business Development; Arnie Abad, Southampton, RN; Suzanne D'Addona, Island Harvest, Social Work Intern; Alyssa Maretta, Suffolk Care Collaborative, Project Manager, Behavioral Health; Mary Ann Benzola, Custom Computer, Director of Marketing; Tahirah Ellis, Long Island Federally Qualified Health Center, Community Health Coach; Melissa Baker, NBLCA, VP Administration; Stephanie Prichard, United Lifeline, Director.