



Community Health Needs Assessment

Good Samaritan Hospital, Suffern, NY Bon Secours Charity Health System



Executive Summary

Good Samaritan Hospital is a member of the Bon Secours Charity Health System (BSCHS) which consists of three hospitals: Bon Secours Community Hospital, Port Jervis, NY; Good Samaritan Hospital, Suffern, NY and St. Anthony Community Hospital, Warwick, NY. Additionally, BSCHS provides the services of a Certified Home Health Agency, two long-term care facilities; an assisted living and adult home facility and several other off-site medical programs.

Good Samaritan Hospital is a non-profit, 370-bed hospital providing emergency, medical, surgical, obstetrical / gynecological and acute care services to residents of Rockland and southern Orange Counties in New York; and northern Bergen County, New Jersey. The hospital also serves these communities as an Area Level II Trauma Center and provides complete cardiovascular care, including open heart surgery.

Over the period of nine months Good Samaritan Hospital worked collaboratively with the Rockland County Department of Health (RCDOH) on a Community Health Needs Assessment that included focus group interviews with representatives of our community with a knowledge of public health. Agency Profiles were completed by all community partners who manage programs and services that address community needs. Additionally, the New York State Department of Health (NYSDOH) Indicators for Tracking Public Health Priority Areas, 2013 – 2017 helped form the foundation for the needs assessment process.

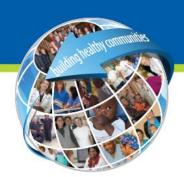
In addition to performing a Community Health Needs Assessment, all hospitals in New York State (NYS) are required to submit a three year Community Service Plan to the NYS Department of Health by November 2013. NYS mandates that each Community Service Plan is based on the NYS Prevention Agenda 2013-17. This Prevention Agenda is the blueprint for state and local action to improve the health of New Yorkers in five priority areas and to reduce health disparities for racial, ethnic, disability, socioeconomic and other groups who experience them.

Based on data from the above mentioned community assessment activities and the NYS Prevention Agenda priorities, the most significant health needs of our service area are as follows:

- Chronic Disease prevention
- Healthy and Safe environments
- Healthy Women, Infants and Children
- Mental Health and Substance Abuse
- Communicable Diseases

In this report we have identified community wide resources that can assist in addressing the health needs of our community. We will work with many of these community partners to develop plans and programs designed to improve the health of our community.

If you would like additional information on this Community Health Needs Assessment (CHNA) please contact Good Samaritan Hospital at 845-368-5000.



FACILITY DESCRIPTION AND VISION

Good Samaritan Hospital is a non-profit, 370-bed hospital providing emergency, medical, surgical, obstetrical / gynecological and acute care services to residents of Rockland and Orange Counties in New York; and northern Bergen County, New Jersey. The hospital also serves these communities as an Area Level II Trauma Center.

Good Samaritan Hospital provides regional specialty services, including comprehensive cancer treatment services and the first and only cardiovascular program in the lower Hudson Valley area which includes, open heart surgery, cardiac catheterization laboratory, emergency angioplasty, electrophysiology studies, and a pacemaker clinic. Good Samaritan offers a Wound Care Center, maternal/child services, including a high level II special care nursery.

Good Samaritan Hospital provides social, psychiatric and substance abuse services for the area and kidney dialysis services through its Frank and Fannie Weiss Renal Center. Good Samaritan's Certified Home Care Agency provides home health care service to the residents of Rockland and Orange Counties.

As a member of Bon Secours Health System, Inc., the Mission of Good Samaritan Hospital is to make visible God's love and to be Good Help to Those in Need, especially those who are poor, vulnerable and dying. As a System of caregivers, we commit ourselves to help bring people and communities to health and wholeness as part of the healing ministry of Jesus Christ and the Catholic Church.

Inspired by the Healing Ministry of Jesus and the Charisms of Bon Secours and the Sisters of Charity of Saint Elizabeth, the Bon Secours Charity Health System by the year 2015, will be distinguished as the leading provider of quality, compassionate and community based health care services in the Hudson-Delaware Valley.



SECTION I: FACILITY SERVICE AREA AND DESCRIPTION OF COMMUNITY

Good Samaritan Hospital serves populations of lower New York State, principally Rockland and Orange counties. Rockland County is located approximately 30 miles north of Manhattan on the West side of the Hudson River. The County is a popular residence for people who commute to work in nearby Westchester and Bergen Counties, as well as Manhattan. The County comprises approximately 115,000 acres and contains more than 35,000 acres of preserved open space and park land.

Rockland County continues to experience steady population growth in its five towns and 19 villages. The most recent Census Department estimates indicate that Rockland County grew 8.7% from 2000 to 2010, and now includes 311,687 residents.

In Rockland County, there was substantial growth in all age cohorts 65 and older, a consistent trend nationally. Gender among the age groups is roughly equal from the early age cohorts through the 40s, but after age 65, women continue to outnumber men. Preliminary population projections through 2035 show that Rockland County's older population may double in size while those ages 30 to 44 may decrease in size.

Twenty-one percent of Rockland County's population was estimated to be foreign-born in 2010. Among the 63,058 Rockland county residents estimated to be foreign born in 2007, the largest group was born in the Latin America and the Caribbean (48%). One quarter of foreign-born residents (25%) originated from Asia. Approximately another quarter (23%) came from Europe and 3% from Africa. Countywide, 32.9% of persons over age 5 speak a language other than English at home.



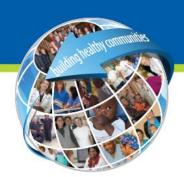
SECTION II: METHODOLOGY

In January 2013, Bon Secours Charity Health System created an internal steering committee to manage our participation in the system-wide Community Health Need Assessment process. The steering committee members included Clare Brady, SVP Mission; Sr. Madeline Cipriano, Director Mission; Barbara Demundo, RN, Director Community Outreach; Deborah Marshall, VP Planning, Marketing and Strategic Initiatives; and Jason Rashford, Director Building Healthy Communities. Through the leadership of this steering committee, Good Samaritan Hospital worked collaboratively with the RCDOH and the Rockland County Public Health Priorities Steering Committee to conduct a Community Health Needs Assessment.

The RCDOH, led by E. Oscar Alleyne, D.Ph., MPH, and Director of Epidemiology & Public Health Planning, was the lead agency to coordinate the data collection and direct the focus group interviews. An Agency Profile (Appendix B) was created to gather up to date data about community service agencies and the services they provide.

Other agencies that participated in the county's process were Nyack Hospital, Hudson River HealthCare, Refuah Health Center, Dominican College, Northern Services Group, the Rockland County Office for the Aging, ARC of Rockland, the Haitian American Cultural and Social Organization (HACSO) of Rockland and the Lower Hudson Valley Perinatal Network. Each of these agencies has special knowledge of the population sector that they serve. Specifically, Hudson River HealthCare and Refuah Health Center are federally qualified health centers that provide health care for a largely medically underserved population and HACSO of Rockland exclusively serves the Haitian minority population in Rockland County.

Focus group interviews with representatives from the above mentioned organizations took place between January and August 2013. Agency Profiles were completed to outline available services, current practices and proposed actions and new activities. Additionally, data from the Rockland County Indicators for Tracking Public Health Priority Areas, 2013 – 2017 was used to further define areas of community need (Appendix C).



SECTION III: IDENTIFIED HEALTH NEEDS

The New York State (NYS) Prevention Agenda 2013-17 is the blueprint for state and local action to improve the health of New Yorkers in five priority areas and to reduce health disparities for racial, ethnic, disability, socioeconomic and other groups who experience them. The Prevention Agenda is a 5-year effort to make New York the healthiest state. Developed in collaboration with 140 organizations, the plan identifies New York's most urgent health concerns, and suggests ways local health departments, hospitals and partners from the health, business, education and nonprofit organizations can work together to solve them.

The Prevention Agenda is designed to serve as a guide to local health departments as they work with their community to develop mandated Community Health Assessments and to hospitals as they develop mandated Community Service Plans and Community Health Needs Assessments required by the Affordable Care Act.

The Prevention Agenda identifies key strategies and interventions to address critical health issues and reduce health disparities in five priority areas:

Chronic Disease

Chronic diseases such as cancer, heart disease, stroke and asthma are among the leading cause of death and disability for New Yorkers, accounting for approximately 70 percent of all deaths. In addition, chronic diseases affect the daily living of one out of every ten New Yorkers. Key focus areas include reducing obesity in adults and children; reducing death, disability and illness related to tobacco use and secondhand smoke exposure; and increasing access to high-quality chronic disease preventive care and management in clinical and community settings.

Healthy and Safe Environments

Enhancing the quality of our physical environment – air, water and the "built" environment – can have a major impact on public health and safety. The Prevention Agenda establishes four focus areas to achieve this objective: improving outdoor air quality; increasing the percentage of New Yorkers who receive fluoridated water and reducing health risks associated with drinking water and recreational waters; enhancing the design of communities to promote healthy physical activity and reducing exposure to lead, mold and toxic chemicals; and decreasing injuries, violence and occupational health risks.

Healthy Women, Infants and Children

Recognizing that key population indicators related to maternal and child health have remained stagnant, or in some cases worsened in the past decade, the Prevention Agenda has established focus areas for maternal and infant health; child health; and reproductive, pre-conception and interconception (between pregnancies) health. Goals include reducing pre-term births and maternal mortality; promoting breastfeeding; increasing the use of comprehensive well-child care; preventing



dental caries in children; preventing adolescent and unintended pregnancies; and promoting greater utilization of health care services for women of reproductive age.

Promote Mental Health and Prevent Substance Abuse

At any given time, almost one in five young people in the U.S. is affected by mental, emotional or behavioral disorders such as conduct disorders, depression or substance abuse. The Prevention Agenda recognizes that the best opportunities to improve mental health are to initiate interventions before a disorder manifests itself. The Prevention Agenda calls for greater utilization of counseling and education; clinical and long-lasting protective interventions to promote mental, emotional and behavioral well-being in communities; preventing substance abuse; and strengthening the infrastructure across various systems to promote prevention and better health.

Communicable Diseases

The Prevention Agenda strategy will promote community-driven prevention efforts to promote healthy behaviors, increase HIV testing, and reduce the incidence of diseases. The Prevention Agenda focuses on promoting early diagnosis and treatment of HIV and sexually transmitted diseases (STDs); improving rates of childhood immunizations, especially children aged 19-35 months; and encouraging greater utilization of sanitary procedures in hospitals and other health care facilities to reduce the potential for healthcare-associated infections.

The NYS Prevention Agenda goals and objectives for 2017 include:

- Reduce the number of adults who are obese by 5 percent so that the age-adjusted percentage of adults ages 18 years and older who are obese is reduced from 24.2 percent (2011) to 23 percent
- Expand the role of health care and health service providers and insurers in obesity prevention and treatment
- Decrease the prevalence of cigarette smoking among adults with incomes less than \$25,000 by 30 percent, from 28.5 percent (2011) to 20percent
- Reduce the newly diagnosed HIV case rate by 25 percent to no more than 14.7 new diagnoses per 100,000
- Stop the annual increase of the rate of hospitalizations due to falls among residents ages 65 and over by maintaining the rate at 204.6 per 10,000 residents (2008-2010)
- Reduce the percentage of preterm births (less than 37 weeks gestation) by 12 percent to 10.2 percent (Baseline: 11.6 percent)



SECTION IV: PRIORITY NEEDS

Good Samaritan Hospital has identified two priority areas as the main objectives for our community health improvement strategies over the next three years. We determined these priority areas in partnership with the Bon Secours Charity Health System CHNA steering committee and the Rockland County DOH Epidemiologist using the Rockland County Health Assessment results and the New York State Prevention Agenda. Both priority areas fall within the NYS Prevention Agenda Priority to Prevent Chronic Disease and they are as follows:

- 1) Reduce Obesity in Children and Adults
- 2) Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Good Samaritan Hospital has established a Three Year Implementation Plan to address these Priority Needs in conjunction with other resources in our community. The Implementation Plan may be found at the end of this document (Appendix A).



SECTION V: DESCRIPTION OF EXISTING HEALTH CARE FACILITIES AND COMMUNITY RESOURCES AVAILABLE TO MEET IDENTIFIED COMMUNITY NEEDS

Several partner organizations that have additional expertise to assist in addressing the NYS Prevention Agenda Priority Areas are identified below. In addition to those mentioned below, a listing of other NYS Prevention Agenda Partners for Rockland County and their activities is attached to this document (Appendix D)

Chronic Disease Prevention:

In addition to Good Samaritan Hospital's planned interventions the following hospitals and healthcare organizations have the expertise and resources available to address chronic diseases:

- Nyack Hospital
- Refuah Health Center
- Hudson River Healthcare
- Good Samaritan Home Care Agency
- Jawonio
- Helen Hayes Hospital
- Northern Services Group

Healthy and Safe Environments:

Healthy and Safe Environments encompasses air and water quality issues, access to healthy foods, assault-related hospitalizations, and hospitalizations/ ED visits related to falls. Good Samaritan Hospital has a Fall Prevention outreach program that is managed by the hospital's Trauma Nurse Coordinator. Additionally, the Rockland County Department of Health's public health outreach initiative *A Matter of Balance* also educates the community about fall prevention.

Healthy Women, Infants and Children:

In addition to Good Samaritan and Nyack Hospital's Maternal and Infant hospital-based services, the Lower Hudson Valley Perinatal Network (LHVPN) has expertise and resources available to address these concerns. The LHVPN's mission is:

- To support and enhance maternal, child and family health services in Dutchess, Putnam, Rockland & Westchester counties
- To eliminate disparities in the health status of women, children and families in our 4 county region
- To develop and maintain a constituency to support maternal, child and family health services
- To influence public policy with regard to maternal, child and family health.



Promote Mental Health and Prevent Substance Abuse:

The outpatient program at The Monsignor Patrick J. Frawley Psychiatric Unit at Good Samaritan Hospital is designed to treat emotional and psychiatric disorders in adolescents, adults and geriatric patients. In addition, our patients have access to a number of comprehensive services in the Alcohol Outpatient Clinic and our Chemical Dependency Program. In addition to direct care for individuals, the Mental Health Outpatient Clinic offers mental health consultation and outreach services to community organizations.

The Rockland County Department of Mental Health oversees delivery of high quality, comprehensive, person-centered and recovery oriented mental health services, developmental disability services and chemical dependency services.

Communicable Diseases:

Rockland County Department of Health has chosen Communicable Disease prevention as one of their main areas of focus in their Community Health Improvement Plan. Good Samaritan Hospital partners with the Rockland County DOH to administer the seasonal flu vaccine to county residents. Additionally, the hospital offers influenza and pneumonia vaccines to all inpatients as appropriate.

Nyack Hospital is partnering with the Rockland County DOH on a formal communicable disease vaccination program and Refuah Health Center and Hudson River Healthcare both offer primary care services to help prevent communicable diseases.



APPENDICES



<u>APPENDIX A: THREE YEAR IMPLEMENTATION PLAN</u>

Good Samaritan Hospital has identified two priority areas as the main objectives for our community health improvement strategies over the next three years:

- 1) Reduce Obesity in Children and Adults
- 2) Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Focus Area 1: Reduce Obesity in Children and Adults

The goal of the following interventions is to reduce the incidence of obesity in our targeted population. The interventions outlined below are planned as a means to achieving the NYS 2017 objectives for obesity incidence in Rockland County.

Good Samaritan Hospital supports the concept of population health as it relates to health improvement strategies and, by positively impacting the health of our local community, we will lay the foundation for effecting positive health changes throughout the broader population we serve.

The following interventions are planned:

Year 1: Launch a series of communications to familiarize the community as well as hospital employees with our CHNA. Empower employees to become a resource for referrals to community resources and wellness services and provide information regarding physical recreational activities in the community.

Specifically:

- Post CHNA on hospital websites and present at local hospital director meetings beginning in January 2014
- Develop listing of accessible community resources for wellness services and free or low cost physical fitness and recreational activities
- Identify internal champions from among hospital staff to work with community outreach to help disseminate the above mentioned listings throughout the hospital service area



Year 2: Work closely with local health departments and community partners to implement physical activity and nutrition programs.

Specifically:

- Develop and promote walking programs within the hospital's service area
- Create connections between local farmers and local food systems, i.e. hospitals, schools, senior nutrition programs and grocery stores
- Offer health screenings and educational sessions on healthy behaviors including diet and exercise as measures to achieve and maintain a healthy BMI

Year 3: Develop worksite wellness initiative that encourages employees to incorporate physical activity into their daily routine and model healthy behaviors.

Specifically:

- Launch worksite wellness initiative at Good Samaritan Hospital
- Assist other employers to personalize a worksite wellness program to meet the needs of their employees
- Partner with worksite wellness sites to offer on-site screenings and educational programs

<u>Focus Area 2</u>: Increase Access to High-Quality Chronic Disease (Diabetes) Preventive Care and Management in Clinical and Community Settings

The goal of the following interventions is to improve the overall health of people within our service area who are living with diabetes. The objective is to reduce hospitalizations due to short-term complications of diabetes and achieve the NYS 2017 target objectives for Rockland and Orange counties.

In addition to the above, Good Samaritan Hospital will specifically address the disparity and lack of diabetes education for the Spanish speaking communities within our health system's service area.

Year 1: Work with Good Samaritan Hospital Certified Diabetes Educators to determine current practices and set goals to expand internal and community outreach programs.

Specifically:

- Develop listing of all diabetes education programs provided by Good Samaritan Hospital for in-patients, employees and community members by March 2014
- Work with local health departments and other health care providers to develop comprehensive listing of all diabetes education programs offered within Rockland County
- In November 2014, host community Diabetes Expo in recognition of American Diabetes Month in Rockland County



Year 2: Perform diabetes education gap analysis to determine specific populations and geographical locations where additional resources are needed. Identify Spanish speaking neighborhoods and/or populations in need of diabetes education and launch educational programs.

Specifically:

- Utilize community partners/focus groups to perform gap analysis and determine locations and audiences for expanded diabetes education programs by March 2015
- Launch one, new community-based pilot diabetes education program in Rockland County by June 2015
- Launch one Spanish language community-based diabetes education program in Rockland County by Sept. 2015

Year 3: Evaluate effectiveness of pilot programs launched in 2015. If programs are determined to have been successful, continue to host additional programs. If programs are not considered successful, determine new location(s) for second pilot programs.

Specifically:

- Host three additional community-based diabetes education programs in Rockland County by Dec. 2016
- Host three additional Spanish language community-based diabetes education programs in Rockland County by Dec. 2016



APPENDIX B: AGENCY PROFILE

Agency Name:	Agency Contact Person:
Phone:	Contact Email Address:
Agency Website:	
Please identify the category that best describes you	
Business	Community-Based Organization
Community Health Center	Diagnostic and Treatment Center
Faith-Based Organization	Hospital
Mental Health Provider	Physician Office
School/College	Other (Please Specify):
Please List MAIN Office Location:	Hours of Operation:
Please List Additional Office Locations:	Hours of Operation:
What is your agency's mission:	<u>,</u>



Who is served by your agency? (Please indi income, etc.):	icate if services are specific to any age group,
What is your geographic target area?	
What is your agency's top health or service	priorities? (Please list up to 3)
What is the estimated number of people served annually by your agency?	Approximately how many staff are employed by your agency?



For <u>new activities / services proposed</u>, please indicate any support or resources that may be needed to deliver the services.

Goal #1:		
Goal #2:		



APPENDIX C: ROCKLAND COUNTY INDICATORS FOR TRACKING PUBLIC HEALTH PRIORITY AREAS, 2013 – 2017

Rockland County Indicators for Tracking Public Health Priority Areas, 2013-2017

	Improve Health Status and Reduce Health Disparities					
	Indicator	Data Years	Rockland County	New York State	NYS 2017 Objective	
1.	Percentage of premature death (before age 65 years)	2008- 2010	21.2	24.3	21.8	
2.	Ratio of Black non-Hispanics to White non- Hispanics		1.94	2.12	1.87	
3.	Ratio of Hispanics to White non-Hispanics		1.93	2.14	1.86	
4.	Age-adjusted preventable hospitalizations rate per 10,000 - Ages 18+ years	2008- 2010	110.4	155.0	133.3	
5.	Ratio of Black non-Hispanics to White non- Hispanics		1.47	2.09	1.85	
6.	Ratio of Hispanics to White non-Hispanics		1.13	1.47	1.38	
7.	7. Percentage of adults with health insurance - Ages 18-64 years		84.5 (83.3- 85.7)	83.1 (82.9- 83.3)	100	
8.	Age-adjusted percentage of adults who have a regular health care provider - Ages 18+ years	2008- 2009	87.8 (83.9- 91.7)	83.0 (80.4- 85.5)	90.8	
	Promote a Healthy and	Safe E	nvironment			
	Indicator	Data Years	Rockland County	New York State	NYS 2017 Objective	
9.	Rate of hospitalizations due to falls per 10,000 - Ages 65+ years	2008- 2010	207.2	204.6	Maintain	
10.	Rate of emergency department visits due to falls per 10,000 - Ages 1-4 years	2008- 2010	417.1	476.8	429.1	
11.	11. Assault-related hospitalization rate per 10,000		1.1	4.8	4.3	
12.	Ratio of Black non-Hispanics to White non- Hispanics		2.69	7.43	6.69	



	Indicator	Data	Rockland	New York	NYS 2017
	Prevent Chroni	ic Disea	ses		
20. Percentage of residents served by community water systems with optimally fluoridated water		2012	0.0*	71.4	78.5
19.	19. Percentage of homes in Healthy Neighborhood Program that have fewer asthma triggers during the home revisits		0.0*	12.9	20
18.	8. Percentage of population with low-income and low access to a supermarket or large grocery store ²		4.9	2.5	2.24
17.	7. Percentage of commuters who use alternate modes of transportation ¹		26.7	44.6	49.2
16.	Percentage of population that lives in a jurisdiction that adopted the Climate Smart Communities pledge	2012	100.0	26.7	32.0
15.	Rate of occupational injuries treated in ED per 10,000 adolescents - Ages 15-19 years	2008- 2010	84.2	36.7	33.0
14.	Ratio of low income ZIP codes to non-low income ZIP codes		0.67	3.25	2.92
13.	Ratio of Hispanics to White non-Hispanics		2.28	3.06	2.75

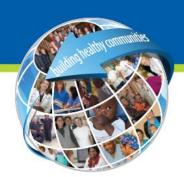
	Indicator	Data Years	Rockland County	York State	NYS 2017 Objective
21.	Percentage of adults who are obese	2008- 2009	15.8 (12.2- 19.4)	23.2 (21.2- 25.3)	23.2
22.	Percentage of children and adolescents who are obese	2010- 2012	16.9	17.6	NYC: 19.7 ROS: 16.7
23.	Percentage of cigarette smoking among adults	2008- 2009	9.5 (6.6- 12.5)	16.8 (15.1- 18.6)	15.0
24. Percentage of adults who receive a colorectal cancer screening based on the most recent guidelines - Ages 50-75 years		2008- 2009	63.4 (56.0- 70.2)	66.3 (63.5- 69.1)	71.4
25.	Asthma emergency department visit rate per 10,000	2008- 2010	33.7	83.7	75.1
26.	Asthma emergency department visit rate per 10,000 - Ages 0-4 years	2008- 2010	71.4	221.4	196.5
27.	27. Age-adjusted heart attack hospitalization rate per 10,000		13.9	15.5	14.0
28. Rate of hospitalizations for short-term complications of diabetes per 10,000 - Ages 6-17 years		2008- 2010	2.3	3.2	3.06
29.	Rate of hospitalizations for short-term complications of diabetes per 10,000 - Ages 18+ years	2008- 2010	3.4	5.6	4.86



	Prevent HIV/STDs, Vaccine Preventable Diseases and Healthcare-Associated Infections					
	Indicator	Data Years	Rockland County	New York State	NYS 2017 Objective	
30.	Percentage of children with 4:3:1:3:3:1:4 immunization series - Ages 19-35 months ³	2011	34.4	47.6	80	
31.	Percentage of adolescent females with 3-dose HPV immunization - Ages 13-17 years	2011	9.3	26.0	50	
32.	Percentage of adults with flu immunization - Ages 65+ years	2008- 2009	78.6 (72.3- 84.8)	75.0 (71.5- 78.5)	66.2	
33.	Newly diagnosed HIV case rate per 100,000	2008- 2010	7.7	21.6	14.7	
34.	Difference in rates (Black and White) of new HIV diagnoses		36.7	59.4	45.7	
35.	Difference in rates (Hispanic and White) of new HIV diagnoses		S	31.1	22.3	
36.	Gonorrhea case rate per 100,000 women - Ages 15-44 years	2010	78.6	203.4	183.1	
37.	37. Gonorrhea case rate per 100,000 men - Ages 15-44 years		46.0	221.7	199.5	
38.	Chlamydia case rate per 100,000 women - Ages 15-44 years	2010	724.8	1619.8	1,458	
39.	Primary and secondary syphilis case rate per 100,000 males	2010	1.3*	11.2	10.1	
40.	Primary and secondary syphilis case rate per 100,000 females	2010	0.0*	0.5	0.4	
	Promote Healthy Women,	Infants	, and Childr	en		
	Indicator	Data Years	Rockland County	New York State	NYS 2017 Objective	
41.	Percentage of preterm births	2008- 2010	9.8	12.0	10.2	
42.	Ratio of Black non-Hispanics to White non- Hispanics		1.85	1.61	1.42	
43.			1.29	1.25	1.12	
44.	4. Ratio of Medicaid births to non-Medicaid births		0.85	1.10	1.00	
45.	Percentage of infants exclusively breastfed in the hospital	2008- 2010	38.4	42.5	48.1	
46.	Ratio of Black non-Hispanics to White non- Hispanics		0.31	0.50	0.57	



47.	Ratio of Hispanics to White non-Hispanics		0.36	0.55	0.64
48.	Ratio of Medicaid births to non-Medicaid births		0.95	0.57	0.66
49.	Maternal mortality rate per 100,000 births	2008- 2010	S	23.3	21.0
50.	Percentage of children who have had the recommended number of well child visits in government sponsored insurance programs ⁴	2011	68.0	69.9	76.9
51.	Percentage of children ages 0-15 months who have had the recommended number of well child visits in government sponsored insurance programs		68.7	82.8	91.3
52.	Percentage of children ages 3-6 years who have had the recommended number of well child visits in government sponsored insurance programs		81.4	82.8	91.3
53.	Percentage of children ages 12-21 years who have had the recommended number of well child visits in government sponsored insurance programs		56.6	61.0	67.1
54.	4. Percentage of children with any kind of health insurance - Ages 0-19 years		94.4 (93.3- 95.5)	94.9 (94.5- 95.3)	100
55.	Percentage of third-grade children with evidence of untreated tooth decay	2009- 2011	22.6 (18.9- 26.2)	24.0 (22.6- 25.4)	21.6
56.	Ratio of low-income children to non-low income children		1.33	2.46	2.21
57.	Adolescent pregnancy rate per 1,000 females - Ages 15-17 years	2008- 2010	9.5	31.1	25.6
58.	Ratio of Black non-Hispanics to White non- Hispanics		8.61	5.74	4.90
59.	Ratio of Hispanics to White non-Hispanics		15.00	5.16	4.10
60.	Percentage of unintended pregnancy among live births	2011	19.5	26.7	24.2
61.	Ratio of Black non-Hispanics to White non- Hispanics		6.03	2.09	1.88
62.	Ratio of Hispanics to White non-Hispanics		4.07	1.58	1.36
63.	• • • • • • • • • • • • • • • • • • • •		1.65	1.69	1.56
64.	Percentage of women with health coverage - Ages 18-64 years	2010	85.9 (84.2- 87.6)	86.1 (85.8- 86.4)	100



65.	Percentage of live births within 24 months of previous pregnancy	2008- 2010	22.0	18.0	17.0
	Promote Mental Health and Pr	eventio	n Substance	Abuse	
	Indicator	Data Years	Rockland County	New York State	NYS 2017 Objective
66.	Age-adjusted percentage of adults with poor mental health for 14 or more days in the last month	2008- 2009	8.1 (5.5- 10.7)	10.2 (8.7- 11.7)	10.1
67.	Age-adjusted percentage of adult binge drinking during the past month	2008- 2009	13.1 (8.9- 17.3)	18.1 (16.1- 20.2)	18.4
68.	Age-adjusted suicide death rate per 100,000	2008- 2010	5.2	6.8	5.9

- * Fewer than 10 events in the numerator, therefore the rate is unstable
- + Fewer than 10 events in one or both rate numerators, therefore the ratio is unstable s Data do not meet reporting criteria
- 1- Alternate modes of transportation include public transportation, carpool, bike, walk, and telecommute
- 2- Low access is defined as greater than one mile from a supermarket or grocery store in urban areas or greater than ten miles from a supermarket or grocery store in rural areas
- 3- The 4:3:1:3:3:1:4 immunization series includes: 4 DTaP, 3 polio, 1 MMR, 3 hep B, 3 Hib, 1 varicella, 4 PCV13
- 4- Government sponsored insurance programs include Medicaid and Child Health Plus



APPENDIX D: NYS PREVENTION AGENDA PARTNERS - ROCKLAND COUNTY

NYS Prevention Agenda Partners - Rockland County, NY

Priority Area	Focus Area	Partner	Partner Information
Promote a Healthy	1 0000 7 11 00	i di di oi	1 di dioi miormadon
and Safe			
Environment	Water Quality	Rockland County	Drinking Water Enhancement
Promote a Healthy		,	J and a late of
and Safe			
Environment	Built Environment	Rockland County	Healthy Neighborhoods Program
Promote a Healthy			
and Safe			
Environment	Built Environment	Rockland County	Lead Poisoning Prevention Program
Promote a Healthy	Injuries, Violence		
and Safe	And Occupational	Rockland Family	Rape Crisis & Sexual Violence
Environment	Health	Shelter, Inc.	Prevention
		American Lung	
	Reduce Illness,	Association of New	
	Disability And Death	York, Inc. for POW'R	
	Related to Tobacco	Cessation	Promote tobacco use cessation,
Prevent Chronic	Use And	Center/POW'R To Be	especially among low SES populations
Diseases	Secondhand Smoke	Tobacco Free	and those with poor mental health
			Prevent initiation of tobacco use by New
	Reduce Illness,	American Lung	York youth and young adults, especially
	Disability And Death	Association of New	among low socioeconomic (SES)
Drayant Chrania	Related to Tobacco	York, Inc. for POW'R	populations
Prevent Chronic	Use And Secondhand Smoke	Against Tobacco Coalition	Eliminate exposure to secondhand smoke
Diseases	Reduce Illness,	Coantion	SHORE
	Disability And Death		Prevent initiation of tobacco use by New
	Related to Tobacco		York youth and young adults, especially
Prevent Chronic	Use And	Rockland County	among low socioeconomic (SES)
Diseases	Secondhand Smoke	Health Department	populations
Prevent Chronic	Reduce Obesity In	Early Care and	populationio
Diseases	Children And Adults	Learning Council	Interventions in Child Care Settings
2.03000	Carony and y addition	New York State	mierrement in erma eare eeunige
Prevent Chronic	Reduce Obesity In	Association of County	
Diseases	Children And Adults	Health Officials	ARRA Component II - Menu Labeling
Prevent Chronic	Reduce Obesity In	Rockland County	Creating Healthy Places to Live, Work &
Diseases	Children And Adults	Health Department	Play (CHP2LWP)



	Daduca Illacca		
	Reduce Illness,		
	Disability And Death Related to Tobacco		
Danis and Olemenia			Tabasas Enfances and Day many
Prevent Chronic	Use And	D 11 10 1	Tobacco Enforcement Program
Diseases	Secondhand Smoke	Rockland County	(ATUPA)
	Increase Access To		
	High Quality Chronic		
	Disease Preventive		
	Care And		
	Management In		
Prevent Chronic	Both Clinical And	Clearwater Research	
Diseases	Community Settings	Inc.	Sodium Reduction in Communities
	Increase Access To		
	High Quality Chronic		
	Disease Preventive		
	Care And		
	Management In	Community Health	
Prevent Chronic	Both Clinical And	Care Association of	
Diseases	Community Settings	NYS	ARRA Component II
	Increase Access To		
	High Quality Chronic		
	Disease Preventive		
	Care And		Increase screening rates for
	Management In		cardiovascular disease, diabetes and
Prevent Chronic	Both Clinical And	Hudson River Health	breast/cervical/colorectal cancer,
Diseases	Community Settings	Care, Inc.	especially among disparate populations
	Increase Access To		
	High Quality Chronic		
	Disease Preventive		
	Care And		
	Management In	The New York	
Prevent Chronic	Both Clinical And	Academy of Medicine	Designing a Strong and Healthy New
Diseases	Community Settings	(NYAM)	York (DASH-NY)
Prevent HIV, STDs,			
Vaccine Preventable		Community	
Diseases and		Awareness Network	
Healthcare	Prevent HIV and	for a Drug-free Life	Health and Human Services for LGBT
Associated Infections	STDS	and Environment	Individuals, Families and Communities
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and			
Healthcare	Prevent HIV and	Haitian Centers	Community Mobilization Programs
Associated Infections	STDS	Council, Inc.	(formerly CDIs)



			The state of the s
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and			
Healthcare	Prevent HIV and	Haitian Centers	Targeted Prevention and Support
Associated Infections	STDS	Council, Inc.	Services Programs (formerly MSAs)
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and			
Healthcare	Prevent HIV and	Hudson River Health	Hepatitis C - Mono-Infected (State
Associated Infections	STDS	Care, Inc.	Funded)
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and		Hudson Valley	
Healthcare	Prevent HIV and	Community Services,	
Associated Infections	STDS	Inc.	Expanded Syringe Access Program
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and		Hudson Valley	
Healthcare	Prevent HIV and	Community Services,	HIV/STI/Hep C Prev & Related Svcs for
Associated Infections	STDS	Inc.	Gay Men/MSM
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and		Hudson Valley	
Healthcare	Prevent HIV and	Community Services,	HIV/STI/Hep C Prev & Related Svcs for
Associated Infections	STDS	Inc.	Heterosexual Men & Women
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and		Hudson Valley	
Healthcare	Prevent HIV and	Community Services,	Regional Prevention and Support
Associated Infections	STDS	Inc.	Programs (formerly CSPs)
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and	Prevent Vaccine		
Healthcare	Preventable		
Associated Infections	Diseases	Rockland County	Rabies Program
Prevent HIV, STDs,			
Vaccine Preventable			
Diseases and	Prevent Vaccine		
Healthcare	Preventable		
Associated Infections	Diseases	Rockland County	Immunization Program
		New York	
Promote Healthy		Presbyterian	
Women, Infants, and	Maternal and Infant	Columbia - Regional	
Children	Health	Perinatal Center	Regional Perinatal Centers



Promote Healthy Women, Infants, and		Regional Primary	Statewide Oral Health Technical
Children	Child Health	Care Network (RPCN)	Assistance Center
Promote Healthy			
Women, Infants, and		Rockland County	Children with Special Health Care
Children	Child Health	Health Department	Needs Program
Promote Healthy			
Women, Infants, and			School Based Health Centers- Dental
Children	Child Health	Refuah Health Center	Clinics
Promote Healthy			
Women, Infants, and		SUNY Research	
Children	Child Health	Foundation	Keeping NY Kids Alive
Promote Healthy			
Women, Infants, and		Rockland County	
Children	Child Health	Health Department	Early Intervention Program
	Reproductive,		
Promote Healthy	Preconception And		
Women, Infants, and	Inter-Conception	Rockland County	
Children	Health	Health Department	Family Planning Program