

Community Input  
September 2019

***Priority Selection for the  
Livingston County  
Community Health  
Improvement Plan  
2019-2021***

# Objectives

- Provide a brief summary of MAPP assessments
- Discuss the prioritization method used by the Community Health Assessment Leadership Team
- Focus area selection
- Next steps

# Summary of MAPP Assessments

# MAPP

## Mobilizing for Action through Planning and Partnerships

- a community-driven strategic planning process for improving community health

## Four assessments to collect data to assist with decision-making

- Community Health Status
- Community Themes and Strengths
- Forces of Change
- Local Public Health System

# Community Health Assessment

# Community Health Status assessment

- 2018 *My Health Story* survey
- 495 county residents completed

## Summary of health-related concerns for self, loved ones and county to prioritize

% of participants with response in each category

Top 5 issues highlighted for each question

	Biggest fear - self	Biggest fear - others	County priority - adults	County priority - children
Mental/emotional health issues	<b>17.3%</b>	<b>14.9%</b>	<b>22.2%</b>	<b>17.1%</b>
Weight	<b>9.8%</b>	<b>6.7%</b>	<b>16.4%</b>	<b>15.4%</b>
Cancer	<b>7.0%</b>	<b>9.5%</b>	5.1%	0.1%
Heart conditions	<b>6.2%</b>	3.5%	3.9%	0.0%
Cost	<b>5.9%</b>	<b>10.0%</b>	<b>10.9%</b>	5.2%
Diet/nutrition	2.4%	<b>6.0%</b>	<b>9.7%</b>	<b>21.5%</b>
Exercise	3.9%	4.2%	7.6%	<b>15.1%</b>
Substance abuse	0.4%	2.6%	<b>20.5%</b>	<b>15.9%</b>

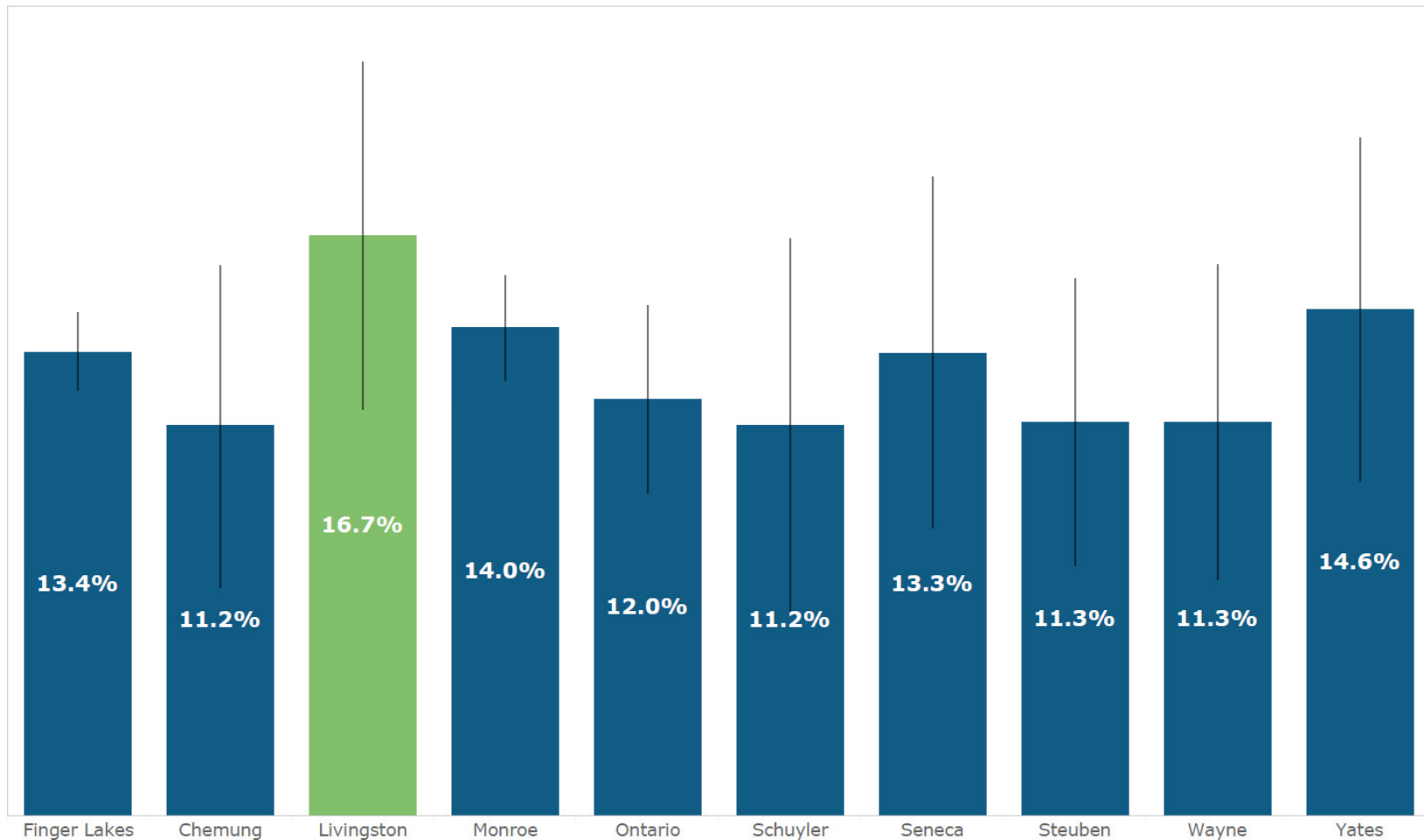
## Select 2018 *My Health Story* survey results

Metric	%
% of adults diagnosed with hypertension	34.8%
% of adults diagnosed with high cholesterol	23.4%
% of adults diagnosed with obesity	21.4%
% of adults diagnosed with COPD/asthma	18.1%
% of adults diagnosed with diabetes	15.4%
% of adults always stressed about having enough money to afford healthy food	18.2%
% of adults who currently use cigarettes	11.8%

# My Health Survey

Percent of adults who are always stressed about having enough money to afford rent/mortgage (Q.5a)

Livingston County sample = 490

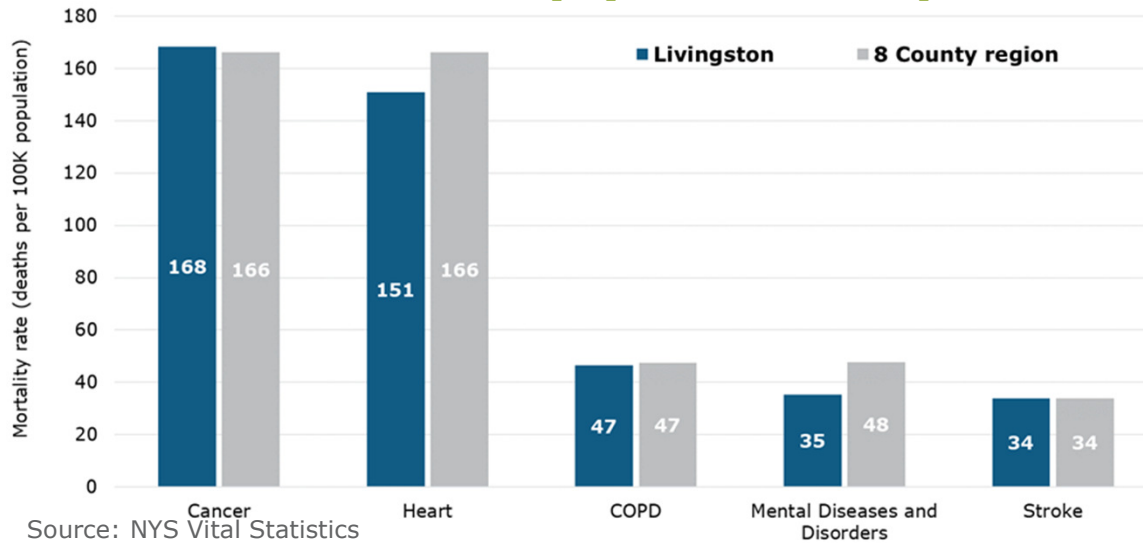


Source: *My Health Story* survey 2018. Analysis by Common Ground Health incorporates weighting to normalize survey participants to demographics of each county. Estimates shown with 95% confidence intervals.

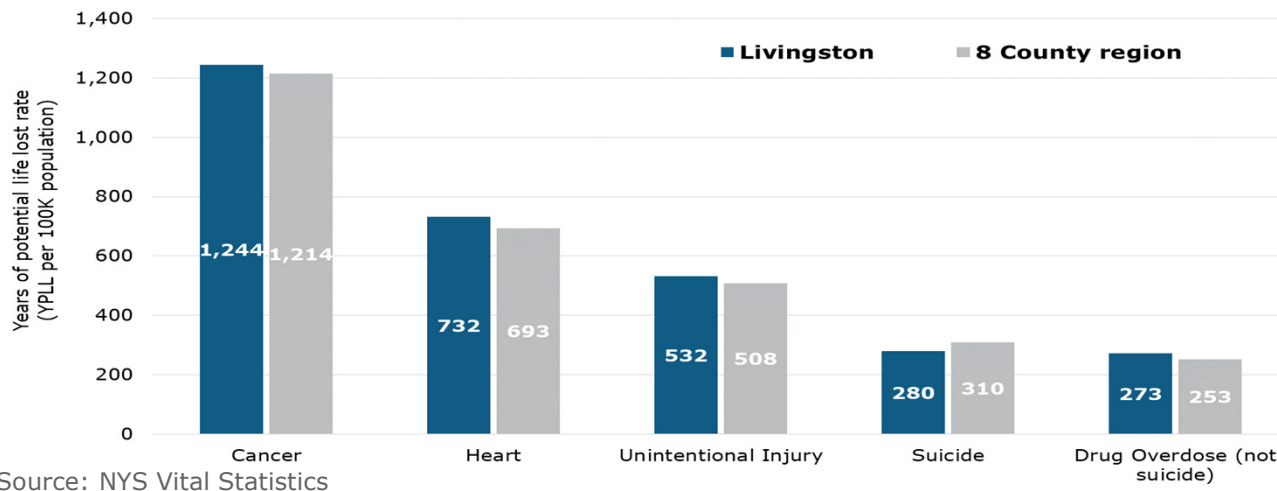


# Causes of mortality

## Top five causes of mortality (2010-2015)



## Top five causes of premature mortality (2010-2015)

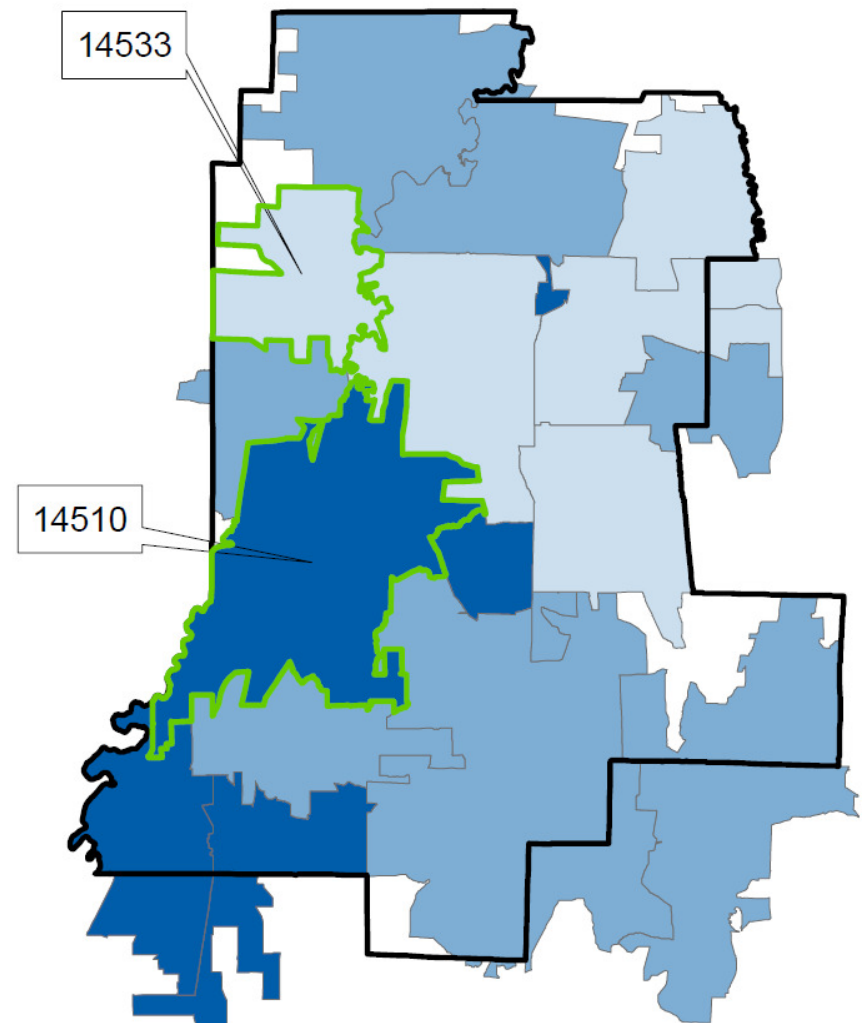


## Disparities within the county influences average life expectancy

Although average life expectancy in Livingston County is 78.4 years, how long residents live on average varies by more than 6 years depending on their ZIP code.

For example, ZIP code area 14510, **Mount Morris, NY**, has an estimated life expectancy of only 74.4 years at birth. By contrast, the county's highest estimated life expectancy, 80.5 years, is found in **Piffard, NY's** 14533 ZIP code area.

Source: NYSDOH Vital Statistics 2012-2014 3-year estimates.  
Calculations performed by Common Ground Health.



Research has shown that poverty is associated with shorter life expectancy. Residents with lower socioeconomic status are less likely to seek preventative care and to monitor/maintain good health behaviors for a variety of reasons.

# Housing

<b>Indicator</b>	<b>2000</b>	<b>2008-12</b>	<b>2013-17</b>
Vacant housing units <sup>1</sup>	8%	11%	11%
Homeownership rate <sup>2</sup>	75%	75%	73%
Housing affordability for renters <sup>3</sup>	29%	32%	35%
Overall housing cost burden <sup>4</sup>	-	28%	29%

Source: U.S. Census Bureau, American Community Survey

1. The percentage of residential housing units that are unoccupied or vacant.
2. The percentage of all occupied housing units (not vacant) that are owner-occupied (not rented).
3. The proportion of household income that goes toward monthly rent, utilities and fuel and indicates how affordable housing is for renters.
4. The share of housing units with people paying 30% or more of their income in rent or ownership costs.

## Bike/pedestrian accidents, 2013-2017

Fatalities by Person/Crash Type										
Fatality Type	Fatalities					Fatalities Per 100,000 Population				
	2013	2014	2015	2016	2017	2013	2014	2015	2016	2017
Pedestrian Fatalities	0	1	0	1	2	0	1.55	0	1.56	3.13
Bicyclist (or Other Cyclist) Fatalities	0	0	0	0	0	0	0	0	0	0

Source: National Highway Traffic Safety Administration (NHTSA)

## Breastfeeding

Breastfeeding						Exclusive BF			
Ever		6+ months		12+ months		3+ months		6+ months	
Number	%	Number	%	Number	%	Number	%	Number	%
679	76	283	24	510	15	156	19	280	12

Source: NYS Pediatric Nutrition Surveillance System (PedNSS)

# Community Themes and Strengths Assessment

Gathers information about what is important to the community, how the quality of life is perceived, and what assets are available to improve community health.

Livingston County CTS Focus Group Summary	
	pg 1
What are some of the strengths in our community/county?	County programs (Falls/Chronic Disease Prevention), the collaboration between the LCDOH, Noyes, OFA, and GVHP, law enforcement, the sense of community, and the volunteerism.
What are things around where you live that help you to be healthy?	Access to health care (nursing home, providers: mental health, physical therapy, and others), churches, grocery stores and farmers' markets, social groups and clubs, Meals on Wheels and other meal programs, numerous opportunities for outdoor activities (hunting, fishing, hiking, playgrounds), opportunities for indoor activities (at schools, gym).
What are some of the challenges for our community/county?	Access to services (including the stigma attached to seeking mental health care and fear of being recognized), the cost of more nutritious, quality food, drugs, elder care providers, the fear of those receiving mental health services, lack of a community center or YMCA, poverty, resistance to change, varying sidewalk conditions, and transportation issues, including lack of transportation for accessing services, cost of transportation, traffic patterns, and road conditions.

<p>What are the things that are available or unavailable where you live that make it harder to be healthy?</p>	<p>Access to fast foods, need for better trails (like the Genesee Valley Greenway) and bicycle-friendly roads, decreased cost of gym memberships, more elder care resources, improved transportation, and a clean environment (e.g.-no garbage in the street, improved water quality, and removal of standing water).</p>
<p>What do you consider are the major health concerns for our community/county residents?</p>	<p>Access to care (high cost, shortage of specialty and mental health providers), chronic diseases, elder care, the environment (no garbage in the street, improved water quality, and removal of standing water), the lack of knowledge of healthy eating and healthy food preparation, and substance use.</p>
<p>What changes do you think would help our community become healthier?</p>	<p>Access to services and transportation, a community center, residents' willingness to change, better weather, increased exercise opportunities, increased family time, better access to healthy food, increase awareness of available services, more mental health services and education.</p>

# Forces of Change Assessment



Identifies the external factors that affect the environment in which Livingston County's public health system operates and the related challenges and opportunities these factors pose.

<b>Theme</b>	<b>Force</b>	<b>Threat</b>	<b>Opportunities</b> <small>pg 1</small>
Aging population	Increasing older adult population	Lack of resources to meet their needs	
Access - Cost	Affordability of prescription meds to effectively manage health needs; potential increase in the number of uninsured; changes in Medicaid Managed Care System	Increase in hospitalizations; increased prevalence of poor health; poor quality of life	Increase home care provider resources; advocate for legislative oversight of insurance companies
- Information	Users and caregivers lack knowledge of Medicaid Managed Long Term Care services	Increase in hospitalizations; increased prevalence of poor health; poor quality of life	
- Providers	Lack of mental health and elder care providers	Increased isolation; unmet health care needs; increased Adult Protective Service referrals and oversight; challenge finding aides for certain households	Pay aides living wage; provide them F/T employment and benefits; create student loan relief in this field to encourage enrollment
- Services	Mental health issues at earlier ages; growing need for more community based mental health services; workforce shortage	Increase in hospitalizations; poor quality of life; increased isolation; unmet health care needs; increased Adult Protective Service referrals and oversight	Create student loan relief in this field to encourage enrollment
- Transportation	Lack of transportation in rural areas	Don't get proper medical care; unmet nutritional needs	

Theme	Force	Threat	Opportunities <span style="float: right;">pg 2</span>
Community	Decrease in membership in churches/service groups as members age out and not replaced by younger members; social isolation; struggling families	Unmet requests for help due to lack of resources; increased prevalence of poor health; poor quality of life; poor child supervision	Parent education and support from local agencies
Economic	Cheap junk food easily accessible; shrinking school districts; exodus out of NYS; decrease in affordable housing options	Increased obesity leading to poor health outcomes; decreased funding for students; shrinking healthcare workforce	Increase community awareness and utilization of curbside markets and local farmers' markets
Legal/Politics	OMH vs JD system impacts youthful offenders' access to needed services; pending legislation to legalize recreational marijuana in NYS; recent legislation on late term abortions	Increase in other addictions and DUIs; increased need for mental health and support services	
Substance Abuse	Vaping and drug use risk behaviors, especially vaping in 6-8 grade levels	Health issues related to vaping are essentially unknown at this time	Educate children about vaping; educate community on available resources; CASA is a great resource for education and prevention programs
Technology	Social media; increased screen time	Negative impact on mental health; limited social development	Educate parents on risks and need to family unit engaged with child's behavior

# What are your health inequity concerns for Livingston County?

Theme	Forces	Threat	Opportunities
Access	Need for proper support for successful transitions post high school – to college, trade school, employment, etc		
- Cost	High cost of medications with high insurance deductibles		
- Providers	Lack of caregivers – both formal and informal to care for those with chronic health problems		
- Information	Communication/awareness of available support services.		Need to constantly work on getting word out using variety of methods, about all available education and service options available to LC residents. Make it town/location specific – when applicable.
	Need to get education and prevention information to all who want/need it (Aging Mastery, CDSMP, MOB, Tai Chi).		
Community	High % of single parent households		
	Isolation – especially older adults or those with disabilities or mental health illness		
Economic	Need for a “living wage”		
	Loss of businesses and/or lack of growing businesses in region – loss of job opportunities	Local tax base decreasing	
		Impact of tax cap – state and counties	
		Increased # of unemployed people	
Housing	Need for affordable/safe housing		
Technology	Lack of internet services to utilize tele-medicine options		Provide classes and educational opportunities at multiple locations throughout the county...throughout the year.
			Identify and help arrange transportation options to help people get to classes.
Transportation	Transportation challenges – employment, access health care		

# Local Public Health Assessment

# Public Health Assessment

To identify how well the local public health system functions.

	Met	Indifferent	Not Met
1. <b>Monitor health</b> status to identify and solve community health problems	87%	12%	1%
2. <b>Diagnose and investigate</b> health problems and health hazards in the community	90%	10%	0%
3. <b>Inform, educate, and empower</b> people about health issues	80%	19%	1%
4. <b>Mobilize community partnerships</b> and action to identify and solve health problems	94%	6%	0%
5. <b>Develop policies</b> and plans that support individual and community health efforts	89%	10%	1%
6. <b>Enforce laws</b> and regulations that protect health and ensure safety	86%	12%	2%
7. <b>Link people</b> to needed personal health services and assure the provision of health care when otherwise unavailable	89%	9%	2%
8. <b>Assure competent</b> public and personal health care <b>workforce</b>	90%	9%	1%
9. <b>Evaluate</b> effectiveness, accessibility, and quality of personal and population-based health services	86%	4%	0%
10. <b>Research</b> for new insights and innovative solutions to health problems	54%	35%	11%

# Hanlon Method Overview

# Hanlon Method Overview

- A widely-recognized tool accepted for prioritization of community issues
- Rates each health problem on the following criteria:
  - Percent affected by the health problem (A)
  - Seriousness of health problem (B)
  - Effectiveness of potential interventions (C)
- Will also use PEARL Test to further screen our options

# Hanlon calculation

**A**

% of Population Affected by Problem	Size "Rating"
25% or more	9 or 10
10% - 24.9%	7 or 8
1% - 9.9%	5 or 6
.1% - .9%	3 or 4
.01% - .09%	1 or 2
< .01%	0

**B**

How Serious Problem is Considered	Seriousness "Rating"
Very Serious	9 or 10
Serious	6, 7 or 8
Moderately Serious	3, 4 or 5
Not Serious	0, 1 or 2

**C**

Effectiveness of Available Interventions to Reduce or Eliminate the Problem	Effectiveness "Rating"
Very Effective (80-100%)	9 or 10
Relatively Effective (60-80%)	7 or 8
Effective (40-60%)	5 or 6
Moderately Ineffective (20-40%)	3 or 4
Relatively Ineffective (5-20%)	1 or 2
Almost Entirely Ineffective (Less than 5%)	0

$$(A + 2B) \times C$$



# Pearl Test

<b>Propriety</b>	(1) Is the problem one that falls within the overall scope of operation, and (2) is it consistent with mission statement?
<b>Economic Feasibility</b>	(1) Does it make economic sense to address the problem? (2) Are there economic consequences as a result of the problem NOT being addressed?
<b>Acceptability</b>	Will the community and/or target population accept a program to address the problem?
<b>Resources</b>	Are, or should, resources be available to address the problem?
<b>Legality</b>	Do current laws allow, favor or prohibit interventions to address the problem?

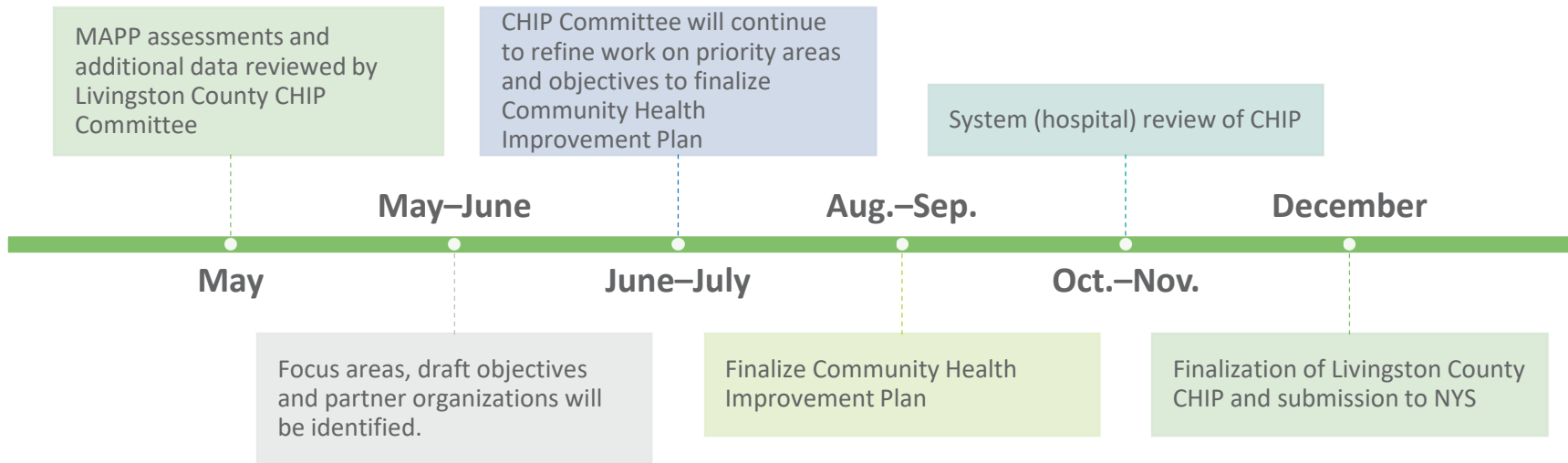
# Result of Prioritization Meeting

The following are priorities to be included in the CHIP 2019-2021:

- **Prevent Chronic Diseases**
  - **Healthy Eating and Food Security**
  - **Physical Activity**
  - **Chronic Disease Preventative Care Management**
- **Promote Well-Being and Prevent Mental and Substance Use Disorders**
  - **Facilitate supportive environments that promote respect and dignity for people of all ages**
  - **Use thoughtful messaging on mental illness and substance abuse**
  - **Prevent underage drinking among youth and excessive alcohol consumptions by adults**
  - **Prevent Opioid overdose deaths**
  - **Prevent and Address Adverse Childhood Experiences**
  - **Prevent Suicides**

# Next Steps

## Timeline example



If you have questions, concerns or suggestions regarding the Community Health Improvement Plan priorities, please contact Lisa Beardsley by October 12, 2019 at 243-7531 or [lbeardsley@co.livingston.ny.us](mailto:lbeardsley@co.livingston.ny.us).

