

Community Service Plan Update 2016



The Mission of Oswego Hospital is to provide accessible, quality care and improve the health of residents in our community.



Oswego Hospital

An Affiliate of Oswego Health

www.oswegohealth.org

Community Service Plan Introduction

In 2013, the New York State Department of Health required local health departments and hospitals, including Oswego Hospital to identify at least two priorities from its list of five Prevention Agenda Priorities Toward the Healthiest State. After selecting its priorities, hospitals were charged to develop a community health improvement plan or Community Service Plan (CSP) to address them.

The Five Prevention Agenda Priorities:

- *Prevent Chronic Disease*
- *Promote a Healthy and Safe Environment Action Plan*
- *Promote Healthy Women, Infants and Children Action Plan*
- *Promote Mental Health and Prevent Substance Abuse Action Plan*
- *Prevent HIV, Sexually Transmitted Diseases, Vaccine-Preventable Diseases and Healthcare-Associated Infections*

Healthcare providers could select two focus areas from one priority, such as tobacco use and obesity within the priority area Prevent Chronic Disease, or two focus areas from two different priorities such as tobacco use from the Prevent Chronic Disease priority and injury from Promote a Healthy and Safe Environment.

The two Prevention Agenda Priorities selected by Oswego Hospital in 2013 were:

- *Prevent Chronic Disease*
- *Promote Mental Health and Prevent Substance Abuse*

This CSP update describes the programs and services Oswego Hospital implemented during 2015 in its efforts to improve the health of the community.

Healthcare Partners

In developing and implementing its CSP objectives, Oswego Hospital worked alongside its many healthcare partners who include:

- *Oswego County Health Department*
- *Oswego County Opportunities*

Oswego Hospital Medical Staff

Cornell Cooperative Extension

Tobacco Free Network

Fulton and Oswego YMCAs

Oswego County Mental Hygiene

Farnham Family Services

The Rural Health Network of Oswego County, which includes 35 health and human services agencies, as well as payor representatives, that provide services in Oswego County.

Prevention Agenda Selection Process

Data Used

The data used to determine the priorities included Oswego Health's own patient data and its patient readmissions rates, statistics provided by the Oswego County Health Department and the Robert Wood Johnson Foundation's/University of Wisconsin's County Health & Roadmaps document.

Oswego Health also used the services of Research and Marketing Strategies (RMS) which conducted research for the health system's 2015 Community Health Needs Assessment, which was completed at the end of last year. The firm utilized primary and secondary sources to gather information about the healthcare resources available within the Oswego Health service area.

According to the University of Wisconsin Population Health Institute, Oswego County has ranked near the bottom (a negative position) of the 62 counties of NYS in terms of factors that impact overall health for the past six years (2010–2015).

Oswego County has ranked last on the list of counties for the past five years for poor health behavior measures, which includes: adult smoking, adult obesity, physical inactivity, excessive drinking, motor vehicle crash death rate, sexually transmitted infections and teen birth rates.

Meanwhile, Oswego County ranked in the 2nd quartile in 2015 in terms of health outcomes as measured by the University of Wisconsin Population Health Institute, after having been in the 3rd quartile for several years. In 2015, the county was ranked 31 of 62, rising from a ranking of 46 in 2010. This demonstrates improvement.

Oswego County has seen significant improvements in terms of mortality, measured by the number of

premature deaths, ranking 33rd for 2015, rising from a ranking of 50 in 2010.

These improvements in life measures over the same timeframe include, going from a ranking of 43rd in 2011 to 30th in 2015. Morbidity measures include poor or fair health status, number of poor physical health days and mental health days, and low birth weight rates.

While this improvement is encouraging, there are many issues that impact the health outcomes of county residents, including the local economy. Key major employers have left the area over the past 20 years resulting in chronic unemployment. While the unemployment rate for Oswego County was 6.0 percent (as of October 2015), slightly down from 6.8 percent the previous year, it was announced in November 2015 that yet another major employer would close, resulting in some 600 higher than average paying jobs, leaving the area over the next several years.

Furthermore, included among the RMS recommendations in the 2015 CHNA was the statement, "Activities which Oswego Health elects to pursue in the promotion of healthier lifestyles need to recognize that poverty is a significant barrier, greatly contributing to patient compliance with desired behavior changes."

This job loss has led to a reduction in the number of commercially insured residents. Many other residents are utilizing healthcare plans that have high co-pays of \$30 and \$40, making their management of a healthy lifestyle expensive.

Survey Findings

RMS further researched the needs in the Oswego Hospital service area through a County Demographic Profile. This profile revealed that among the leading causes of death according to vital statistics as of March 2015, were heart disease, chronic lower respiratory disease and cancer. The profile further revealed high rates of smoking, adult obesity, physical inactivity and excessive drinking, among county residents.

RMS also conducted phone calls to key stakeholders to learn their major community health concerns. In these phone interviews, the most commonly mentioned concern was the need to improve the overall health of residents on a larger scale. Stakeholders were also concerned with overall population health issues, including obesity, smoking, health screenings, and other community-based issues.

In addition, the RMS data identified the need to promote mental health and prevent substance abuse in the community. Secondary research shows that the suicide rate in Oswego County is higher than the New York State average. Oswego County's Suicide Mortality Rate (16.5 per 100,000, based on a 3-year average) is twice as high as NYS as a whole (8.0) and NYS excluding New York City (8.6). This figure is higher than the 2013 finding of 13.2 per 100,000. The suicide mortality rate spiked in 2007 (15.6) and 2011 (19.6), causing the 3-year averages to remain high.

State data also reveals that the percentage of adults in Oswego County reporting 30 days or more of poor mental health was 3.5 percent, up from the 3.2 percent reported in 2013. The NYS overall rate was 3.4 percent.

Three-Year Plan of Action Outlined in its

2014 to 16 CSP:

Priority Area: Prevent Chronic Diseases

Using the NYS Health Department's Promote Mental Health and Prevent Substance Abuse Action Plan, Oswego Health and the Oswego County Health Department have selected:

- *NYS DOH Goal 3.3: Promote culturally relevant chronic disease self-management education.*
- *NYS DOH Objective 3.3.1: By December 31, 2016, increase by at least five percent, the percentage of adults with chronic disease such as arthritis, asthma, cardiovascular disease, or diabetes who have taken an evidence-based course or class to learn how to manage their condition.*
- *NYS DOH Focus Area 3: Increase access to high-quality chronic disease prevention care and management in clinical and community settings.*

Oswego Hospital Goals:

In its efforts to reduce the incidents of diabetes, heart failure and chronic obstructive pulmonary disease (COPD), Oswego Health continued to partner with the Oswego County Health Department to offer Chronic Disease Self-Management (CDSM) classes. The health partners will utilize the CDSM program developed by Stanford University's Patient Education Research Center to achieve this goal.

Oswego Health employees trained in the program will offer at least two CDSM classes each year of the plan. The health system will target those individuals in rural areas and senior citizens, the county's most fragile groups from a health status standpoint. The anticipated results include:

Empowering community members to improve their own health by providing them with education and tools and to also reduce hospital admissions for those enrolled in the program.

To complement the CDSM classes, Oswego Health's Certified Diabetes Educator will provide diabetes counseling to hospital patients and outpatients. In addition, the Educator will continue to offer two free monthly diabetes support groups.

Objectives:

- *By December 31, 2016, increase by at least five percent the number of adults with arthritis, asthma, cardiovascular disease or diabetes who have completed a CDSM program.*
- *By December 31, 2016, increase by at least five percent the number of individuals receiving outpatient diabetic education and attend diabetes support groups.*

Measurements of Effectiveness

- *Staff will routinely track and evaluate the health status of participants.*
- *Measure the number of active sites providing CDSM programs in Oswego County.*
- *Measure the number of enrolled adults who have successfully completed the CDSM program, received outpatient diabetic education or attended a support group.*

Modification Strategy

Hold status meetings with the involved health partners to evaluate progress and achievement of goals.

Achievements for This Priority in 2015

Oswego Hospital is on track with its implementation of the CDSM classes.

During 2015, Oswego Health and its partner, the Oswego County Health Department, held five classes,

three by Oswego Health, with the remaining conducted by the health department. There were a total of 52 participants, with 22 of them completing the six-week program.

The target populations are those individuals with, or at risk for, a chronic disease and their caretakers. During the past year, Oswego Hospital has focused on providing its CDSM classes in Central Square and Hannibal. We have seen a promising response from those individuals who have participated in our classes; all have been engaged and eager to participate in improving their health status.

Our partners contribute their own staff time in providing the required instructor training and the classes themselves. They also assist in conducting related education activities and provide access to sites for class locations.

At the end of the year, we agreed to collaborate once again with the County Health Department in 2016. During 2016, Oswego Health will offer at least two classes. While we continue to struggle with enrollment numbers, those who attend, consistently tell course instructors how much they have benefited from the evidence-based program.

Oswego Health's Certified Diabetes Educator has seen a 8.6 percent increase in the number of individuals she has counseled on an outpatient basis during the past year. Attendance at the two monthly diabetes support groups that she leads continues to fluctuate. In 2016, the support groups will be promoted more in the community to improve attendance and to attract new attendees.

While Oswego County continues to rank in the 4th quartile (bottom) among NYS counties for hospitalizations associated with two chronic conditions there has been some improvement in one area recent years:

- *Diabetes has a hospitalization rate per 10,000 of 15.5 percent, which is lower than NYS as a whole but higher than NYS excluding NYC. However, this rate was 16.8 in 2013 when reported in Oswego Health's Community Health Needs Assessment (CHNA).*
- *Meanwhile, more residents are being hospitalized Chronic Lower Respiratory Disease (including COPD). The hospitalization rate per 10,000 is 56.6 percent, which is significantly higher than NYS excluding NYC but also higher than NYS*

combined. The rate reported in the 2013 CHNA was 41.8 percent.

Successes:

- *Establishing clear goals*
- *Researching evidence-based interventions to address problems among the target population*
- *Identifying process and outcome measures to monitor progress toward reaching goals*

Challenges:

- *Educating the community about the problem*
- *Engaging community leaders to address the problem*
- *Defining target population*

Priority Area: Promote Mental Health and Prevent Substance Abuse

Using the NYS Health Department's Promote Mental Health and Prevent Substance Abuse Action Plan, Oswego Health and the Oswego County Health Department have selected

- *NYS DOH Goal 2.3 Prevent Suicides Among Youth and Adults*
- *NYS DOH Objective 2.3.2: By December 31, 2016, reduce the age-adjusted suicide mortality rate by 10 percent.*

Oswego Hospital Goals:

To reduce suicide rates, Oswego Health will implement the Columbia-Suicide Severity Rating Scale (C-SSRS), an evidenced-based practice, developed by Columbia University Medical Center. The Columbia-Suicide Severity Rating Scale (C-SSRS) is a screening tool which has demonstrated the ability to predict suicide attempts in suicidal and non-suicidal individuals. The C-SSRS will be rolled out to Oswego Hospital's outpatient clinics, inpatient unit, Assertive Community Treatment (ACT) Team and the hospital's emergency department over the course of this plan.

Complementing the suiciderating scale implementation, Oswego Hospital will collaborate with Oswego County Department of Social Services to expand its School-Based Mental Health Services. At these clinics, a licensed social worker provides outpatient mental health

services to students who have been identified by school staff. The school based therapist provides assessment, therapy, and ensures the student is provided referrals for any other identified needed service. These satellite clinics will further assist in assessing and identifying at-risk children and adolescents that may otherwise not seek out mental health services, thereby reducing suicide risk and substance abuse risk for these children.



Objectives:

- *By December 31, 2016, reduce the age-adjusted suicide mortality rate by ten percent to 8.37 per 100,000. Current suicide mortality rate in Oswego County is 9.3 per 100,000, Compared to the NYS average of 7.5 per 100,000. www.health.state.ny.us/statistics/chac/chai/*
- *By December 31, 2016, increase by at least five percent the number of children receiving school-based mental health clinic services.*

Measurement of Effectiveness

- *Monitor the number of locations in the health system oriented to the C-SSRS.*
- *Solicit input from staff on C-SSRS program effectiveness.*
- *Monitor the number of students participating in school based clinic services.*

Modification Strategy

Assess these programs on a yearly basis.

Achievements for This Priority in 2015

Implementation of the Columbia Suicide Severity Rating Scale (C-SSRS)

Oswego Hospital is on track with its implementation of interventions related to this prevention agenda priority. During 2015, Oswego Hospital completed the implemented the CSSRS throughout the Oswego Health system, including its psychiatric hospital, the Oswego and Fulton Health clinics, Oswego Hospital departments, and the Assertive Community Treatment Program (ACT).

Among our partners in meeting our goals are the local schools, NOCHSI, a federally qualified health center, the Oswego County Department of Social Services and several related coalitions, including the Suicide Coalition.

Our partners, who are engaged, assist by conducting education activities, intervention coordination, assisting with advocacy and providing health services.

Oswego Hospital was also introduced the tool to one of its community healthcare partners, Northern Oswego County Health Services Inc. It is hope that this healthcare organization will implement the tool in the near future.

Our Psychiatric Medical Staff (PMS) and mid-level providers were introduced to the C-SSRS tool during one of the group's monthly meetings. In addition, the Behavioral Health division's Continuous Process Improvement (CPI) Plan includes suicide assessment, as one of the measures monitored by physicians and mid-levels.

Expansion of School Based Mental Health Services

Oswego Hospital continues to expand its school-



based mental health clinics and as of January 1, 2016, is providing care in ten schools, up from five at the end of 2014. In October 2015, it was reported that the program had a caseload of 144 students, compared to 101 the previous October.

Along with providing counseling to students, each of the hospital's social workers spends at least five hours each week on the following: therapeutic consultations with school staff regarding admitted students

- *Participation in school meetings*
- *Parent education and engagement*
- *Classroom observation*
- *Training of school staff*
- *Crisis response for admitted students (as available)*
- *Referral to other levels of care or other specialties, as appropriate*

Other related training initiatives

Staff from Oswego Hospital's Behavioral Health Services Department (BHS) are among the community groups that help found the Oswego County Suicide Coalition, which meets monthly.

During 2015, the Coalition held several suicide awareness and prevention trainings. They included:

- *The National Survivors of Suicide Day community event held in Oswego, November 2015.*
- *safeTALK*
Provided at Oswego County's Department of Social Services
Catholic Charities and Oswego County Opportunities Crisis & Development Services.
- *Applied Suicide Intervention Skills Training (ASIST), a two-day intensive interactive and practice dominated course, which was held at the SUNY extension site in the village of Phoenix, to assist clinical, non-clinical caregivers and parents recognize and review risk and to intervene to prevent the immediate risk of suicide. This training is well-known throughout the country.*
- *Mental Health First Aid Adult Version*
SUNY Oswego Center in Phoenix
- *Mental Health First Aid Youth Version*
Cayuga Community College in Fulton
- *Family Acceptance Project for caregivers working with LGBTQ Youth*
Cayuga Community College in Fulton
- *Truth About Suicide Program for College Students*

Cayuga Community College in Fulton

- *More Than Sad Teen Depression*
Presented four sessions to youth groups at Camp Hollis in Oswego
- *Participated in events that provided suicide prevention awareness & educational materials including State Senator Ritchie's Senior Health Fair, as well as health fairs held at the G Ray Bodley High School and Cayuga Community College, both in Fulton.*
- *In addition, Coalition members met with Oswego School District counselors and provide them with suicide prevention/educational packets*
- *Lastly, the Survivor Outreach Program was offered to two newly bereaved families in Oswego County.*

Successes:

- *Identifying the burden/problem to be addressed*
- *Educating the community about the problem*
- *Engaging community leaders to address the problem*
- *Defining the target population*

Challenges:

- *Developing data collection methods*
- *Establishing clear implementation timelines/ milestones*
- *Reviewing and monitoring progress with partners*
- *Continued annual deficits related to limited Medicaid reimbursements*
- *Limited Resources to effectively administer this program*

Oswego Hospital Fast Facts

Oswego Health Services

Oswego Hospital is a part of the Oswego Health system offering a wide range of services in rural Oswego County. Among the affiliates is Oswego Hospital, Oswego County's sole hospital, offering acute medical, emergency, surgical, maternity and behavioral health services. In addition, the health system operates two

outpatient care facilities, the Central Square and Fulton Medical Centers, which offer urgent care, laboratory, medical imaging and physical therapy services.

The health system further includes Oswego Health Home Care, the only hospital-based certified home health agency in Oswego County, as well as Springside at Seneca Hill, a retirement community for those older than age 62 and The Manor at Seneca Hill, a 120-bed skilled nursing facility that also offers short-term rehabilitation and an Adult Day Health Services Program.

In addition, Oswego Health includes the Oswego Health captive professional corporation, Physician Care P.C., providing physician services in orthopedics, cardiology, otolaryngology (ENT), general surgery and primary care.

Oswego Hospital is part of the Oswego Health system providing care to approximately 85,900 residents in the county, which has a total population of 121,000. The Oswego Health service area encompasses much of Oswego County, a rural and economically challenged region. In addition, the health system provides care to some residents who reside in the neighboring counties of Cayuga and Onondaga.

Our Service Area

Within the boundaries of Oswego County are the cities of Fulton and Oswego, as well as several towns and villages, including Central Square, Mexico, Parish and Phoenix. The specific zip codes in Oswego Health's Primary Service Area include:

- 13069: Fulton*
- 13074: Hannibal*
- 13093: Lycoming*
- 13107: Maple View*
- 13111: Martville*
- 13114: Mexico*
- 13115: Minetto*
- 13121: New Haven*
- 13126: Oswego*
- 13142: Pulaski*

Secondary Service Area:

- 13036: Central Square*
- 13064: Fair Haven*
- 13076: Hastings*

13131: Parish

13132: Pennellville

13135: Phoenix

13156: Sterling

Population Demographics Ethnicity



The population of Oswego County is predominately white, with only four percent of the population identified as any other race. With regards to ethnicity, a very small portion (2.4%) of the population identifies itself as Hispanic or Latino.

Economic Factors Impacting the County

Approximately 18.5% of the population of (Oswego County) lives below the poverty level, which is significantly higher than the 10.4% based on data collected in 2010. This represents a negative trend, indicating that economic hardship is growing within the County.

- Among those households living in poverty, 27.5% of children under the age of 18 are living in poverty.

The most likely family unit to be living in poverty are single-mothers with children under the age of 5, where a majority (69%) of those families live in poverty.

The current unemployment rate for Oswego County (as of October 2015) is 6.0%, which is down from 6.8% for the same time in 2014. However, expected closures and downsizing of major employer facilities within in the area are anticipated to cause an increase in unemployment in the future. This information points to continued stress on the local healthcare system.

Oswego County is Aging

While the population is relatively stable, the population of individuals aged 65 or older is expected to increase from 13.9 percent in 2015 to 16.3 percent in 2020. This represents a significant change and validates that the growth in the older population segment will undoubtedly mean a greater demand for services.

Hospitalization Factors

While Oswego County continues to rank in the 4th quartile (bottom) among NYS counties for hospitalizations associated with two chronic conditions there has been some improvement in one area recent years:

The leading causes of death in Oswego County are the same as NYS and NYS excluding NYC:

- *Heart disease, cancer, COPD, stroke and unintentional injury are the top five leading causes of death.*

Health Improvements

- *Oswego County ranked in the 2nd quartile in 2015 in terms of health outcomes as measured by the University of Wisconsin Population Health Institute, after having been in the 3rd quartile for several years. In 2015, the county was ranked 31 of 62, rising from a ranking of 46 in 2010. This demonstrates improvement.*
- *Oswego County has seen significant improvements in terms of mortality, measured by the number of premature deaths, ranking 33rd for 2015, improving from a ranking of 50 in 2010.*
- *Oswego County has shown improvements in quality of life measures over the same timeframe, going from a ranking of 43rd in 2011 to 30th in 2015. Morbidity measures include poor or fair health status, number of poor physical health days and mental health days, and low birth weight rates.*

Community Development Office

150 West Sixth St.

Oswego, New York 13126

315-349-5500